



Speaking up for better care

Healthwatch Norfolk annual report 2025/26

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Chief Executive
Alex Stewart

“Both the NHS and social care play a vital role in our lives, and both are facing 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.”

On behalf of Healthwatch, I want to say 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. Finally, my heartfelt thanks to the dedicated team who I have the pleasure of working with on a daily basis.”

A message from our chair

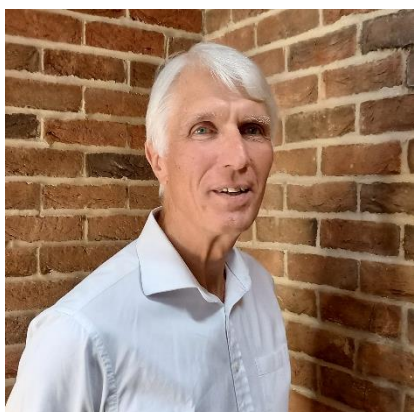
Welcome to the 2025/2026 Annual Report for Healthwatch Norfolk.

Amidst the turmoil and uncertainty of the NHS 10-Year Health Plan, the Dash Review and the planned local government reorganisation, Healthwatch Norfolk has delivered a solid performance in line with its mission.

Not only have we engaged with more members of the Norfolk general public than ever before, but we have also expanded and embedded our working relationships with key stakeholders in the county and beyond. We have shared that feedback through a large number of carefully researched and evidence-based reports that are not only delivered to relevant providers, but also published on our website for the public to read.

Whilst we are faced with the closure of the national statutory Healthwatch system, I am encouraged by the resolve of our Trustees to continue the independent and honest work of Healthwatch Norfolk.

I am glad to say that our stakeholders and partners across the health and social care system are without exception keen to continue to hear and act on the voice of the patient through independent channels and endorse our capability to provide that service.



Chair
Patrick Peal



“I thank my fellow trustees for their diligence and generosity of time and expertise, and to all the staff of Healthwatch Norfolk for their drive and commitment to ensuring that the patient voice drives improvements in health and social care in this region and beyond.”

About us

Healthwatch Norfolk 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 mission is to:

- Listen and engage with people, especially the most vulnerable, to understand their experiences and what matters most to them.
- Influence those who have the power to change services so that they better meet people's needs, now and into the future.
- Inform local people and help them to get the most from their health and social care services.



Our strategic priorities are:

- **Representing local people** – by becoming the leading source of feedback on health and social care.
- **Meaningful engagement** – by working efficiently and effectively to reach diverse communities across the county.
- **Real improvement** – through an intelligence-driven approach to making recommendations for local services.
- **Providing a sustainable service** – by maintaining the funding and expertise required to provide an independent and effective local Healthwatch.
- **Influencing locally and nationally** – by working with other organisations to ensure services are safe, effective, compassionate and high-quality.
- **Expanding our horizons** – by being ready to stand alone in the event of changes in legislation.

Our year in numbers

In 2025/2026 we supported more than 10,500 people to have their say and get information about their care. We employed 13 staff and our work was supported by 10 volunteer Board members.



Reaching out:

10,381 people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

237 people came to us for clear advice and information on topics such as how to raise a concern, how to find relevant healthcare services and accessing an NHS dentist.



Championing your voice:

We published 96 reports about issues such as patients' views on the use of digital technology in managing healthcare, preparing for later life in a county with an ageing demographic and the experiences of carers of people with Serious Mental Illness.

Our most popular report was 'Norfolk Health Services Review', a summary of views of proposed changes to three services - the GP Out-Of-Hours Service, the Norwich Walk-In Centre and the Vulnerable Adults Service Health Inclusion Hub.



Statutory funding:

We're funded by Norfolk County Council. In 2025/26 we received £369,750, which is the same amount as last year.

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 Norfolk. Here are a few highlights:

Spring

Local carers' support services were promoted more widely and a review was launched into how referrals were made, after we found a third of carers who wanted a carers assessment had not had one.



Norfolk County Council pledged to improve access to information about adult social care services for the digitally excluded, following our research into how the over 65s are planning for later life.



Summer

Norfolk and Waveney ICB took on board our recommendations that local Maternity Voices and Neonatal Partnerships needed increased funding and resources.



We worked with Opening Doors to hear from adults with learning disabilities about safeguarding barriers, influencing improvements to training, accessibility, and reporting processes.



Autumn

A new Carers' Charter was created to better support and recognise carers following our research into the experiences of carers of people with Serious Mental Illness.



GP surgeries implemented a number of our suggestions to improve patient experience, including clearer signage for appointment attendees, publicising building work and the addition of staff profile boards.



Winter

We found that little progress had been made in improving access to primary care for Deaf people, three years on from the release of the Norfolk Deaf Friendly Hearing Loss Charter. We have offered to support further promotion going forward.



Our engagement with thousands of 10-11-year-olds resulted in 3,426 pieces of feedback, providing a deeper understanding of young people's views of healthcare. This insight was shared with local stakeholders.



Working together for change

We've worked with neighbouring Healthwatch and health and social care bodies to ensure people's experiences of care in Norfolk are heard by the Norfolk and Suffolk Integrated Care Board, and that our collaborative approach to research informs and strengthens decision making on a regional and national level.

This year we've worked with Healthwatch across the East of England to achieve the following:



Collaborating with local Healthwatch on patient data use

We worked with Healthwatch Cambridgeshire and Peterborough to gather views about the way the NHS uses patient data to enhance care and provide better support in communities. As a result, Norfolk and Waveney and Cambridgeshire and Peterborough ICBs pledged to improve communication about patient data use, tighten safeguards and ensure that people's preferences are recognised and respected. Following this collaboration, three more local Healthwatch contacted us for guidance on how to carry out the same project in their area.



A big conversation about genomics

Our partnership with the Eastern England Secure Data Environment team, along with Healthwatch Leicester and Leicestershire, Healthwatch Hertfordshire and Healthwatch Essex, ensured coordinated engagement on research into public views on genomic (DNA) data use and consent. This joint approach combined insight across areas, ensuring diverse perspectives informed the development of the Secure Data Environment programme going forward.



Annual Partners event

Our annual Partners Meeting brought together leaders from the ICB, Norfolk County Council, ambulance, hospital and mental health trusts to strengthen collaboration and discuss ways in which patient experience can be improved and patient voice embedded in decision-making. By sharing insights from our engagement and project work, we're supporting partners to implement more person-centred services and improve outcomes for local people.

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 Norfolk this year:



Amplifying marginalised voices

Working with local charity Opening Doors, we made sure the views of people with learning disabilities around safeguarding practices were heard by local decision-makers.

We supported service users to share their experiences of safeguarding through workshops, highlighting concerns around understanding, confidence in reporting and accessibility. By amplifying these insights, we helped ensure that barriers identified by a small group informed wider improvements, including clearer information, better support, and more accessible reporting systems.



Getting services to involve the public

We ensured marginalised voices were involved in a major decision about local health services.

During consultation on proposed changes to out-of-hours GP services, the Norwich Walk-in Centre and the Vulnerable Adults Service (VAS) Health Inclusion Hub, we urged the ICB to create a dedicated survey for VAS users. This recommendation was adopted, enabling people experiencing social exclusion, including those who are homeless, to share their views. As a result, their lived experiences were heard and reflected in decision-making processes.



Modernising care over time

We're helping health leaders better understand the impact of a digital NHS.

We are in the fifth year of a project exploring patient and professional perspectives of digital tools in care. Our research into experiences of the NHS App and the Shared Care Record has highlighted the need for clearer communication and practical support, particularly for people with limited access to, or confidence using, technology. We continue to provide the ICB with insight to ensure that the digitalisation of the NHS enables fair, inclusive and efficient access to care for everyone.

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. We have made more than 300 engagement visits to 44 out of 49 postcode areas across Norfolk.

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.



Supporting people power to secure vital healthcare services

We made sure the voices of more than 2,000 people were heard when a consultation into the future of three vital healthcare services began.

Norfolk and Waveney ICB proposed changes to the GP Out-Of-Hours Service, the Norwich Walk-In Centre, and the Vulnerable Adults Service (VAS) Health Inclusion Hub and asked us to provide an analysis of both public and professional stakeholder responses to the plans.

What did we do?

We shared two surveys designed by the ICB with the public and developed a range of materials to inform people of the consultation and encourage them to share their views. We hosted a number of drop-in sessions to reach those who may be digitally excluded and carried out targeted engagement with staff and service users of the affected services.

Key things we heard:



Most people told us they wanted both the GP Out-of-Hours Service and the Norwich Walk-In Centre to remain in their current form. We heard that reducing these services would make it difficult for people to get help when needed, particularly affecting those in rural areas, older adults, disabled people, and those with access to public transport. Increased pressure on A&E or emergency services, was also cited as a major concern, with many suggesting the plans were counter intuitive.

66% of respondents told us that if the VAS Hub changed location, it would have a negative impact on them

"The impact would be huge to myself and my family. I have complex health needs and so does my son. We have both used the Out-of-Hours GP Service several times and would be completely at a loss without this service running at the capacity that it does now."

What difference did this make?

We kept the ICB informed of the strength of public feeling as responses were being gathered, and the ICB decided to announce (before the consultation officially concluded) that all three services would continue operating as they are. Our completed engagement findings included feedback to the ICB about the design of their surveys, which many people had found difficult to understand and navigate.

Helping improve communication in the NHS

This year we have been supporting John* following the death of his wife, when communications failings left the couple unaware of the severity of her condition.

John's* wife Debbie* had been a patient of the Gynaecology Oncology team at a local hospital in 2018. She had a hysterectomy following the discovery of early-stage endometrial cancer. Debbie experienced swelling in her leg in 2025, which she was told was 'possibly' a recurrence of the endometrial cancer. Confusion over certain medical terms and the reasons behind decisions taken during the course of her care, along with assumptions about the patient's understanding of the consequences of her condition, left the couple unaware of the severity of the situation and that Debbie's condition was terminal.

What did we do?

We arranged for John to meet with Debbie's healthcare team, including the GP practice manager and the oncology team at the hospital. We helped John voice his concerns over the ways in which Debbie's condition had been communicated and illustrate the lasting impact it had had on him. The care team told us they had been unaware of the communications failings and thanked John for his feedback.

What difference did this make?

In a letter to John following a meeting with him, the Consultant Gynaecological Oncologist at the hospital wrote:

"I have really reflected on our meeting today and I certainly want to find a way to improve our department at a minimum...we are going to try to move things forward and find a better way to ensure information that is given is summarised and sent to patients in more detail. Information such as this is so vital, we need to ensure that anything that is discussed is documented and fed back to patients and their families."

John's feedback about his experience with Healthwatch Norfolk:

"Healthwatch gave me succinct advice, guidance and unwavering support. As a direct result, I succeeded in arranging fruitful meetings with both the hospital consultant and my local GP practice."

Both consultant and GP practice were frank and honest in answering my questions. That they were prepared to acknowledge their human frailties, i.e shortcomings in my wife's treatment, was, I believe, due in no small part to the presence of Healthwatch Norfolk."

** Names have been changed to protect identities*

Hearing from all communities

We're here for all residents of Norfolk. 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:

- Attending local Pride events to discuss experiences of healthcare with members of the LGBTQIA+ community.
- Engaging with hundreds of school children to learn about their views of health care in the area and help them understand how to give feedback.
- Exploring the experiences of carers of people with Serious Mental Illness, including young carers and those for whom English is a second language.



Improving understanding of healthcare barriers for LGBTQIA+ people

We revealed the extent of the barriers LGBTQIA+ people face when accessing healthcare.

People told us they regularly face incorrect assumptions about their sexual orientation and gender identity, with many noting their preferred pronouns were not respected. Others highlighted mixed experiences of screening and testing, and long waiting times for gender-affirming care.

“They keep asking me if I’m pregnant which makes me feel worse because I’m trans and I know I can’t have children.”

What difference did this make?

We drew up a set of recommendations for the Norfolk and Suffolk ICB, including improved staff training and an upgraded IT system that allows sex and gender to be recorded separately in GP records. Our findings were shared with GP practice managers across the county and we have pledged to review this work in 2027 to assess whether positive change has taken place.

Shining a light on carers of people with Serious Mental Illness (SMI)

Carers of people with Serious Mental Illness will now be better recognised and supported after we highlighted their experiences.

We found that young carers are vulnerable as they are not always recognised as carers, while those who do not speak English as a first language faced stigma and struggled to access financial and emotional support.

“Social services try to listen, but they don’t do what they promised. In 2017, we asked social services for help. They suggested that we return to our home country and even offered us £1,000 for this.”

What difference did this make?

Norfolk and Suffolk NHS Foundation Trust agreed to create a new Carers' Charter. This was designed in conjunction with the carers we had been listening to. The charter outlines how staff should work alongside carers to support their emotional and practical needs and ensure they are involved in the decision-making processes relating to their relative/friend. Carers are now better recognised and valued as a result of our input.

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 237 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 NHS services
- Supporting people to raise a concern about the care they received
- Signposting people to the support services appropriate for their needs



A response for Beth* after her mother's poor care

Beth* contacted us after her mother received poor wound care in hospital and had been unable to secure a response from PALS, despite following up twice.

We supported Beth to take further action by advising her to re-contact PALS and include Healthwatch Norfolk in her correspondence.

Alongside this, we escalated the concern directly to the hospital's Head of Patient Experience to ensure it was addressed promptly. As a result, Beth received a response and a satisfactory resolution, leaving her feeling reassured that her concerns about her mother's care had been taken seriously.



Just to let you know I received an email from the complaints office at the hospital today. Thank you so much for your support in getting me contact finally, and a resolution."

Supporting Andrew's* family with his care home transition

Andrew* was moving into a care home when his family contacted us for guidance, helping them feel supported and reassured at a challenging time.

We explained the process clearly and identified suitable local options, despite the family living outside Norfolk. By sharing knowledge and feedback about local services, we enabled them to make confident choices that ensured Andrew could remain close to his wife. We also provided practical advice on planning for his future wellbeing, ensuring the family felt empowered to make decisions that met Andrew's needs and promoted his quality of life.



Thank you so much. You have been so very helpful. I really appreciate your time and expertise. Your email is really thorough, and I have worked through all the info. It's great to know we are on the right tracks."

** Names have been changed to protect identities*

Finance and future priorities

We receive funding from Norfolk 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	£369,750	Expenditure on pay	£543,576
Additional income	£412,365	Non-pay expenditure	£146,672
		Office and management fee	£34,631
Total income	£782,115	Total Expenditure	£724,879

Additional income is broken down into:

- £40,000 from Norfolk and Suffolk Foundation Trust to engage carers to better understand the challenges of supporting someone with Serious Mental Illness.
- £99,420 from Norfolk County Council exploring person-centred care in care homes.
- £1,750 from NICHE (Norfolk Initiative for Coastal and Rural Health Equalities) to deliver creative engagement with people with learning disabilities on wellbeing, in partnership with Norwich University of the Arts.
- £88,160 from Norfolk Community Health & Care NHS Trust to evaluate people's experiences of in-patient rehabilitation services and commence evaluation of the High Intensity User service.
- £6,227 from Downham Dementia to evaluate the charity, which supports people living with dementia and their carers.
- £18,000 from East Coast Community Healthcare CIC (ECCH) to review ECCH's approach to collecting, analysing and using patient feedback.
- £40,638 from Health Innovation East to lead a public engagement project across the East of England and Midlands on the use of genomic data in research.

Finance and future priorities

Integrated Care System (ICS) funding:

Healthwatch across Norfolk also receive funding from our Integrated Care System (ICS) to support new areas of collaborative work at this level, including:

Purpose of ICS funding	Amount
NHS Cambridgeshire & Peterborough ICB Engaged residents across East Anglia on the use of NHS patient data and how they want to be consulted.	£35,415
NHS Norfolk and Waveney ICB Reviewed Maternity and Neonatal Voices Partnerships across Norfolk and Waveney to identify opportunities for improvement.	£7,498
NHS Norfolk and Waveney ICB Patient and Public Engagement 2025-26	£45,743
NHS Norfolk and Waveney ICB Gathered public views on digital services in primary care while promoting awareness and uptake of the NHS App.	£34,524

Finance and future priorities

Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

Our top priorities for the next year are:

1. Continue to perform our statutory duties to ensure patient voice remains independent and impartial.
2. Support Norfolk County Council with transforming adult social care services across neighbourhoods.
3. Reach more marginalised communities, including those who have a visual impairment and LGBTQIA+ people.
4. Continue working alongside the NHS in Norfolk to increase digital access to healthcare and ensure the voices of those who are digitally excluded are heard.
5. Navigate the current NHS reforms and secure a future for an independent patient feedback system in Norfolk.

Statutory statements

Healthwatch Norfolk, Suite 6, The Old Dairy Farm, Elm Farm Business Park, Wymondham, NR18 0SW.

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

The way we work

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

Our Healthwatch Board consists of 10 members who work voluntarily to provide direction, oversight, and scrutiny of our activities.

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

Throughout 2025/26, the Board met six times and made decisions on matters such as the continuation of a future Healthwatch Norfolk model following the Dash review, and ways in which concerns about access to GP appointments can be addressed. 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, in person at engagement events and through social media, and attended numerous 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, have printed copies available and publicise it on our social media channels and in our monthly e-newsletter.

Statutory statements

Responses to recommendations

We had one statutory provider 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 Overview Scrutiny Committee, the Health and Wellbeing Board and the Adult Safeguarding Board. We have also provided insight for the Independent Investigations Review Committee and Norfolk and Suffolk Foundation Trust's Learning from Deaths Committee.

We also take insight and experiences to decision-makers at the Norfolk and Suffolk Integrated Care Board. For example, we attend the Patients and Communities Committee, the Primary Care Commissioning Committee, Norfolk Place Boards and Health and Wellbeing Partnerships. We also share our data with Healthwatch England to help address health and care issues at a national level.

Healthwatch representatives

Healthwatch Norfolk is represented on the Norfolk Health and Wellbeing Board by Patrick Peal, Chair of Healthwatch Norfolk, and Alex Stewart, Chief Executive of Healthwatch Norfolk.

Healthwatch Norfolk was represented on the Norfolk and Waveney Integrated Care Board by Alex Stewart.

Statutory statements

2025 – 2026 Outcomes

Project/activity	Outcomes achieved
Adult Social Care Year 1	Delivered a final report which fed into the ICB's review of dementia care and new service planning in Norfolk.
	Norfolk County Council reviewed how referrals were made to the Carers Matter Service, with a view to increasing access to the service.
Adult Social Care Year 2: Preparing for Later Life	Norfolk County Council's Healthy Ageing Strategy is informed by the first ASC Year 2 report, with over 65s telling us their three main priorities for growing older: physical activity, social connection and health protection.
	NCC's new Neighbourhood Strategy responds to a key request people made to make use of local assets, such as community centres, to support people closer to home.
	The neighbourhood strategy will also work on identifying people who need better support to prepare for later life
SMI (Serious Mental Illness) Carers	NSFT staff are now working with carers to co-produce new standard operating procedures for Community Mental Health Teams to ensure people with SMIs are living well in the community and carers' concerns are heard and responded to.
	A new Carers' Charter has been created, letting carers know what they can expect from staff they talk to. This has been made available at locations across the county.

Statutory statements

2025 – 2026 Outcomes

Project/activity	Outcomes achieved
Patient Data Project	Final report submitted to Norfolk and Waveney and Cambridgeshire and Peterborough ICBs, with set of recommendations for improving communication and public involvement in patient data use around community support schemes.
	The ICBs pledged to ensure that future data initiatives are built on openness and transparency.
Maternity and Neonatal Voices Partnerships (MNVPs): an independent review	Interviewed 23 people from across the three MNVPs in Norfolk's hospitals to gauge how they are operating and identify areas for improvement.
	Norfolk and Waveney ICB considered a set of options to deliver in response to our recommendations that MNVPs should receive more funding and be employed positions.
Experiences of Inpatient General Rehabilitation	Our final report reviewing Norfolk Community Health and Care Trust (NCH&C) inpatient rehabilitation services was presented at the NCH&C Patient and Carer Experience and Involvement Steering Group.
	Action plan drawn up, including an update of patient information leaflets, the development of ward-based activities that enhance therapy sessions, and the creation of a dementia awareness training package for staff. Staff levels will also be reviewed as part of the annual establishment reviews.

Our year in pictures

Here's just some of the picture highlights of 2025/26.



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