



Speaking up for better care

Healthwatch Stockton-on-Tees Annual Report
2025/26

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Chris McCann

**Acting Chief Executive
Healthwatch England**

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“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.”

A message from our chair

"The NHS and social care system continues to operate under intense pressure, with many people experiencing longer waits, fragmented services and difficulty accessing support at the point they need it most. These challenges are felt directly by individuals and families trying to navigate mental health services, primary care and community support.

"Over the past year, Healthwatch Stockton-on-Tees has played a vital role in ensuring people's real experiences influence how the system understands risk, safety and recovery. Much of what we heard was difficult, and at times deeply concerning, particularly where gaps in care left people feeling frightened, isolated or unsupported.

"By bringing this lived experience into decision making spaces, Healthwatch helped ensure concerns were not dismissed as individual stories, but recognised as patterns that required reflection, learning and change. This has been especially important in relation to mental health rehabilitation and the need for continuity, clarity and joined up support.



Chair
Peter Smith

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"Listening to local people's experiences remains essential if services are to stay accountable and responsive. "

A message from our chair

"People who shared their experiences with Healthwatch this year trusted us with stories about vulnerability, risk and resilience. These were not always easy conversations, but they were essential if services are to respond honestly to what people are experiencing in real life.

"This year's work went beyond listening alone. Healthwatch insight informed system level conversations, supported service development, and strengthened the focus on trauma aware, relationship-based approaches to care. Our mental health work in particular reinforced how continuity, communication and safe transitions can determine whether recovery is supported or undermined.

"I would like to thank everyone who shared their experiences, alongside our staff, volunteers and partners, whose persistence and professionalism ensured those voices were heard where they could make a difference. Their commitment continues to shape safer, more responsive care across Stockton-on-Tees."



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"Whether highlighting compassionate care and dedicated staff, or raising concerns about barriers and frustrations, every contribution helps build a better understanding of how the system is experienced day to day."

About Healthwatch Stockton-on-Tees

Healthwatch Stockton-on-Tees is your local health and care champion. We make sure the voices of people who use health and social care services are heard by those who plan and deliver services.

We listen to people's experiences, share what we hear with decision makers, and help information flow both ways so people understand their choices and where to get support. As an independent statutory body, our agenda is driven by the public and rooted in lived experience.

Our work is shaped by what matters most to local people, from access to GPs and mental health support, to the experiences of carers, families and communities facing the greatest inequalities.



Our vision

A local health and care system where people are heard, included and able to access safe, fair and person-centred care.



Our mission

To listen to people's experiences, amplify local voices, and ensure lived experience informs decisions about health and care at local, regional and national level.

We do this by:

- Listening in different ways and in trusted spaces
- Sharing insight with those who plan and deliver services
- Supporting learning, reflection and improvement
- Remaining independent, transparent and publicly accountable

About Healthwatch Stockton-on-Tees



Our values are:

Equity

We listen with compassion, value every voice, and work to include those who are often left out. We build strong relationships and support people to shape the services they use.

Empowerment

We create a safe and inclusive space where people feel respected, supported, and confident to speak up and shape the changes that matter to them.

Collaboration

We work openly and honestly with others, inside and outside our organisations, to share learning, build trust, and make a bigger difference together.

Independence

We stand up for what matters to the public. We work alongside decision-makers but stay true to our role as an independent, trusted voice.

Truth

We act with honesty and integrity. We speak up when things need to change and make sure those in power hear the truth, even when it's hard to hear.

Impact

We focus on making a real difference in people's lives. We're ambitious, accountable, and committed to helping others take responsibility to make change happen.

Our year in numbers

In 2025/2026 we supported more than 16,600 people to have their say and get information about their care. We employed four staff and, our work was supported by 13 volunteers and 33 Health & Care Ambassadors.



Reaching out:

2,424 people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

5,557 people came to us via website, events, email or telephone for clear advice and information on topics such as advocacy support for making a healthcare complaint, finding an NHS dentist and how to access mental health services.

14,274 people were able to access up-to-date health and care advice and information through our website, social media platforms and newsletters.

We sent out 16 newsletters to over 430 members.



Championing your voice:

We published 9 reports about the improvements people would like to see in areas like Pharmacy First, the NHS app and accessing GPs, as well as support for the Deaf community.

Our most popular report was [Case Study: Mental Health – Jane’s Story](#), highlighting the experience of a young adult who waited nearly two years for mental health support.



Statutory funding:

We’re funded by Stockton-on-Tees Borough Council. In 2025/26 we received £129,000, which is the same as last year.

A year of making a difference

This year, we focused on where people's experiences revealed risk, gaps in care, and opportunities for change. We took those insights into conversations that matter.

Mental health: recovery, rehabilitation and risk

People shared powerful experiences of moving through mental health crisis services, inpatient care, discharge, and life in the community. They told us where support felt unsafe, fragmented, or unclear, and what helps recovery really happen. Their voices shaped system-level discussions about continuity, access, and the future of rehabilitation services.



Cancer care pathways: navigating complexity

We listened to people affected by cancer about diagnosis, treatment, and follow-up care. They described the difficulty of navigating complex pathways, gaps in communication between services, and the emotional toll of uncertainty. This insight highlighted where clearer coordination and better support are needed alongside clinical care.



Hearing from people least likely to be heard

We prioritised reaching communities whose voices are often missing, including Deaf residents, kinship carers, people experiencing homelessness, and people facing multiple disadvantage. By working through trusted relationships, people were able to speak openly about barriers to access, fear, dignity, and what feeling safe in services really means.



Following up where improvement mattered

We returned to earlier areas of concern, including drug and alcohol services and community pharmacy, to understand what had changed, and what had not. This follow-up kept learning visible, strengthened accountability, and ensured people's experiences continued to influence improvement, rather than being treated as a one-off exercise.



Why this mattered

This work helped ensure people's experiences were not only heard, but taken seriously in conversations about risk, recovery, access and system change, locally and across the wider region.

Working together regionally

Raising voices across the North East and North Cumbria

This section highlights how the Healthwatch NENC network worked collectively during 2025–2026 to bring people’s experiences into system decision making, from local services to national policy.

During 2025–2026, the Healthwatch North East and North Cumbria (NENC) network brought together insight from local communities to inform decision making across health and care. Working as a coordinated network of 14 local Healthwatch, we supported the system to understand what people experience in real life. What works, what doesn’t, and what needs to change.

Our role is to be an independent, trusted voice. Sometimes that means leading large scale engagement. Sometimes it means supporting early service design, testing communications, or carefully gathering lived experience on sensitive issues.

Across all this work, one thing is clear, people are more willing to share their experiences when they feel listened to, included, and able to take part through people and organisations they trust, in ways that work for them.



Primary Care Access

Primary care access: understanding what works and what doesn't

Healthwatch NENC supported the rollout of Modern General Practice Access (MGPA) across all 14 local areas.

As changes to GP access were being introduced, Healthwatch teams worked together to help raise awareness and support understanding across local communities.

Teams went out into GP practices, pharmacies, libraries, warm spaces, foodbanks and other community venues. Using MGPA leaflets alongside face-to-face conversations, we were able to give people time to ask questions and better understand their options, particularly those often missed by digital only campaigns.

People told us they welcome having more choice, including the NHS App, Pharmacy First and Extended Access appointments. When systems work well, people experience quicker access and less stress.



Primary Care Access

Primary care access: understanding what works and what doesn't

Many people were unaware of Extended Access or told us they were never offered it. Understanding of Pharmacy First varied, with some people unsure what it could help with or receiving inconsistent information. Digital access worked for some but excluded others, particularly older people, Disabled people and those without confidence, devices or reliable internet access.

The biggest concern raised, continues to be getting a GP appointment. People told us about long waits on phone lines, frustration with online forms, the '8am rush', and difficulties maintaining continuity for ongoing or complex conditions.

Why this mattered

Bringing insight together across the region helped highlight where system intentions were not yet landing in people's real experiences. This strengthened the focus on clearer communication, more consistent offers, accessible information from day one, and non-digital routes that work for everyone, not just those who find systems easy to navigate.



"I didn't know about Extended Access until Healthwatch explained it. No one had ever mentioned it before."

"Online works for some people, but if you're not confident or don't have the right phone, it just shuts you out."

"I still go to the surgery in person because I can't get through on the phone, but then you're told there's nothing available."



Primary Care Access

Primary care access: understanding what works and what doesn't



Winter Care

Helping people understand winter care and pharmacy options

Working with the North East and North Cumbria Integrated Care Board (ICB), Healthwatch supported work to understand whether information about winter care and pharmacy services was clear and useful for local people.

People told us that while some messages were helpful, others were confusing or easy to miss, particularly for those who don't use digital channels or who rely on clear, simple explanations. Testing information face-to-face helped show where messages needed to be clearer, more consistent and easier to act on.

This insight was shared with the ICB to support improvements to winter communications, helping ensure information about pharmacy options and access routes was easier to understand and more likely to reach people who might otherwise be missed.

What this helped change

Testing information with local people helped the ICB understand which messages were working and where clarity was missing, supporting improvements to how winter and pharmacy information was shared across the region.



Winter Care

Helping people understand winter care and pharmacy options

NHS

What additional conditions are covered as part of this service?

- **Aches and pains** - back pain, headache, migraine, muscle ache, period pain, teething, toothache
- **Allergies** - bites and stings, hay fever, skin reaction
- **Colds and flu** - cough, congestion, sore throat, fever / temperature (including fever following immunisation)
- **Ear care** - earache, ear infection, ear wax
- **Eye care** - bacterial conjunctivitis, styes
- **Gastrointestinal care** - diarrhoea, constipation, indigestion, haemorrhoids (piles), reflux, threadworms, vomiting
- **Head lice**
- **Mouth care** - cold sores, oral thrush, ulcers
- **Skin care** - athlete's foot, chicken pox, contact dermatitis / atopic eczema, fungal skin infections, nappy rash, pruritis (itching), scabies, warts, verrucas
- **Vaginal thrush**

NHS

Got an itch?

Tummy trouble?

Tickly cough?

Head to your local pharmacy.

HERE TO HELP

Find further information at: www.thinkpharmacyfirst.health

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“I’d seen the posters, but I didn’t really understand what they were asking me to do until someone explained it.”

“Pharmacies can help with more than people realise, but the information isn’t always clear.”

“If you’re not online, it’s easy to miss important messages.”

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WorkWell

Shaping WorkWell: early service design through lived experience

Healthwatch supported the North East and North Cumbria Integrated Care Board (ICB) with early engagement to inform the development of WorkWell, a new service designed to help people with long-term health conditions stay in or return to work.

At the ICB's request, Healthwatch helped gather targeted feedback from people with lived experience of managing health, disability and work. Given tight timescales and a limited number of sessions, this was delivered through a small number of focus groups, either directly by Healthwatch or through trusted community partners.

People shared the real barriers they face when trying to balance health and work, including caring responsibilities, mental health challenges, stigma and the difficulty of navigating joined up support. Their feedback highlighted the importance of flexibility, trauma informed approaches, and better awareness and understanding from employers.

This work helped ensure that early service design was grounded in lived experience, demonstrating how Healthwatch adds value at the earliest stages by supporting services to be shaped around people's real lives and needs.

What this influenced

This insight helped ensure that WorkWell was shaped early around people's real circumstances, rather than assumptions, particularly for those balancing health, work and caring responsibilities.



"It's not just about my health, it's juggling work, appointments and caring responsibilities."

"Employers don't always understand what people are managing alongside their job."



Palliative Care

Listening on sensitive issues: Palliative and end of life care

Healthwatch supported system-led engagement to inform future palliative and end-of-life care planning across the region.

While the primary approach relied on a regional survey, Healthwatch involvement focused on engaging people who are least likely to share their views through standard engagement routes. Conversations about death, dying and end-of-life care are deeply personal and can be especially difficult for people facing multiple disadvantage.

Healthwatch's contribution highlighted important learning for the system, people do not all engage in the same way. Meaningful insight comes from trusted relationships, safe and supportive environments, and the right approach for the people involved.

Feedback gathered through Healthwatch helped complement survey findings and ensured that voices often missed were considered in future planning.

What this reinforced

This work reinforced the importance of using trusted, supportive approaches when engaging on sensitive topics, ensuring insight from people least likely to take part in surveys was considered alongside wider findings.



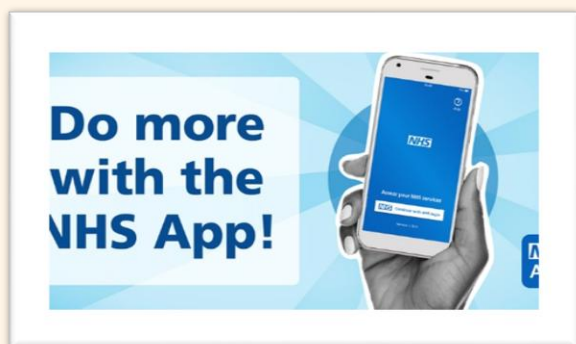
"Talking about end-of-life isn't easy, you need time and people you trust."

"I wouldn't have taken part in a survey, but I was able to talk openly in person."

"You don't speak up unless you feel safe."



Influencing national policy: Developing NHS Online



During 2025–2026, the Healthwatch NENC network submitted a joint response to a national consultation on Developing NHS Online, bringing together what people across the region have told Healthwatch about digital health services.

Based on what people have told Healthwatch over several years, the response reflected mixed experiences of digital health services. Many people value the convenience of online access, particularly the NHS App.

However, people also raised ongoing concerns about:

- Digital exclusion
- Communication
- Continuity of care
- Having real choice about how they access services

Healthwatch highlighted that online services must remain an option, not an expectation. Essential to ensure people are not excluded or disadvantaged as services change are:

- Clear communication
- Meeting the Accessible Information Standard
- Strong non-digital alternatives

This work demonstrates how collective Healthwatch insight helps ensure local people's experiences are heard in national discussions about the future of health and care.

Why this mattered

By bringing together experiences from across the region, Healthwatch helped ensure national discussions about digital health reflected both the benefits people value and the risks of exclusion if choice and accessibility are not protected.

Workforce Voices

Making national work more accessible

Through the NIHR-funded Workforce Voices programme, Healthwatch across the North East and North Cumbria played a direct role in improving how national projects involve people with real experience of health and care.

Healthwatch helped challenge the way information is usually written and shared. We pushed for clearer language, simpler formats and more accessible ways of involving people, so they can understand what's being asked of them and feel confident giving their views.

What difference this made

This work led to clear, practical guidance and tools that show project teams how to communicate better and involve people more meaningfully. It helps prevent people being excluded because information is too technical, unclear or overwhelming.

Why this matters

By working together at a network level within a national programme, Healthwatch showed how lived experience from across the region can change how involvement is done. This helps ensure people's voices are a core part of how national work is designed and delivered.



Mental Health Rehabilitation

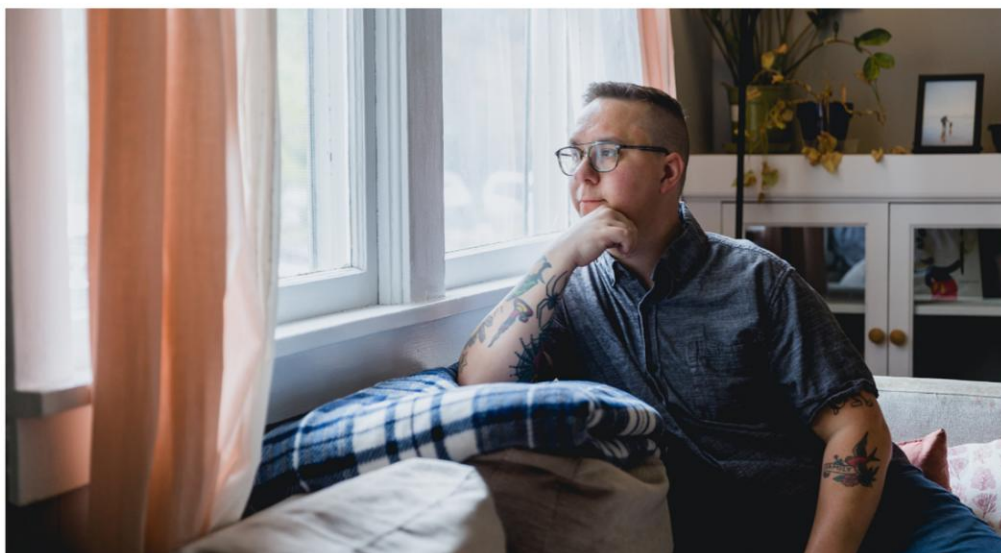
Mental health rehabilitation: what helps people recover – and what puts them at risk

This year Healthwatch supported Tees, Esk and Wear Valleys NHS Foundation Trust to gather in-depth lived experience insight to inform mental health rehabilitation and reablement services across County Durham and Tees Valley.

This work focused on people's stories, not statistics, capturing what it actually feels like to move through crisis services, inpatient care, discharge and community mental health support.

Across all areas, people consistently told us about:

- Long waits for help
- Calls and appointments that didn't happen
- Being passed between services with no one clearly responsible
- Discharge feeling rushed, unsafe or unclear



“Discharge feeling rushed, unsafe or unclear.”

Mental Health Rehabilitation

Mental health rehabilitation: what helps people recover – and what puts them at risk

These experiences often left people frightened, isolated and less likely to seek help again.

At the same time, people were very clear about what makes recovery possible.

They told us they need:

- One person or team who stays involved
- Face-to-face contact when distressed
- Clear follow up and communication that actually happens
- Safe, joined-up discharge planning
- Support that understands trauma and neurodiversity
- Strong links to trusted voluntary and community organisations



Tees, Esk and Wear Valleys
NHS Foundation Trust

“As part of our commitment to co production and improvement, we approached Healthwatch to gather insight on people’s experiences of mental health rehabilitation services. This feedback has directly shaped a programme of investment responding to the issues and opportunities identified.

“As we move forward, rehabilitation teams will continue to work collaboratively with partners across our local communities to ensure services are embedded in ways that promote equitable access and respond to local need.”

Jamie Todd

Director of Operations and Transformation

Tees, Esk and Wear Valleys NHS Foundation Trust

Mental Health Rehabilitation

Mental health rehabilitation: what helps people recover – and what puts them at risk

Families and carers described carrying huge responsibility, often managing risk alone. Many said the only consistent support came from local VCSE organisations, offering familiarity, safety and continuity when statutory services could not.

The findings were brought together in a published insight report with practical, constructive recommendations focused on continuity, safe transitions and community-based support.

System partners have welcomed this insight as a powerful reminder that rehabilitation succeeds when relationships, not just pathways, are in place.

This work shows the unique role Healthwatch plays in bringing lived experience into mental health service design, safely, independently and with the depth needed to drive meaningful change.

What this changed

The report provided system partners with a clear, human picture of how continuity, communication and safe transitions affect recovery, helping reinforce the importance of relationship-based approaches alongside pathway redesign.



"I just want someone to listen."

"I don't fit anywhere in the system."

"I was discharged without a plan and didn't know who to contact."

"They saved my life."



University Hospital Tees

Keeping people involved during system change: University Hospitals Tees



Healthwatch continued to support University Hospitals Tees and system partners as they developed and implemented their Group Model.

Although the main community research took

place in 2024 and was published in 2025, Healthwatch's role continued into 2025–2026. This included supporting follow up work, reflecting on what was learned, and helping shape public-facing engagement so people could see how their feedback was being used.

Healthwatch involvement helped maintain trust with local communities by ensuring conversations remained open, transparent and focused on 'you said, we did'. This reinforced the importance of ongoing dialogue, not one-off consultation, when major service changes are being planned and delivered.



"We want to know what happened after we shared our views."

"It makes a difference when you can see change, not just be asked again."

"Keep involving people, don't just consult once."



Looking Ahead

Across this work, one thing comes through clearly, engagement makes the biggest difference when it is inclusive, trusted and built in from the start.

As services and policies change, the Healthwatch NENC network has shown it can respond quickly and meaningfully, working across 14 local Healthwatch to bring together what people are experiencing in real time.

Our independence means people are willing to speak honestly, especially when things are confusing, difficult or not working as planned.

Looking ahead, Healthwatch will continue to build on this position of trust. This includes contributing to Fit for the Future, an ICB-led programme focused on strengthening the health and care workforce and supporting services to meet future demand.

Healthwatch's role in this work is to bring forward the experiences of people and staff, particularly where access, communication and everyday experiences shape how care is received.



Looking Ahead

We are also continuing our involvement in workforce work linked to the National Institute for Health Research (NIHR), building on the Healthwatch NENC partnership set out in last year's Raising Voices Together report.

For Healthwatch, this means helping ensure learning about the health and care workforce is grounded in lived experience, from patients, communities and staff themselves.

This includes understanding the everyday realities of roles such as GP reception and practice teams, and how these experiences affect access to care.

By connecting local insight with regional and national conversations, Healthwatch NENC helps ensure decisions are shaped by real lives. This can be seen clearly in areas such as dentistry, where people's experiences have helped drive change.

As the system continues to evolve, we will remain independent, responsive and firmly focused on making sure people's experiences lead to meaningful change.

Dentistry: making a difference

People told Healthwatch they were struggling to access NHS dental care and didn't know where to go for urgent help.

Healthwatch brought these experiences directly into system discussions. At ICB Board level, leaders confirmed that progress in dentistry would not have been possible without Healthwatch's involvement. This has led to clearer urgent dental pathways, online booking for urgent care, and improved access across the region.



“By connecting local insight with regional and national conversations, Healthwatch NENC helps ensure decisions are shaped by real lives.”

Reflecting on Impact

Reflecting on impact: recognition and moving forward together

Healthwatch's impact is often built over time. Through sustained engagement and trusted relationships, earlier work across the North East and North Cumbria is now influencing system priorities and discussions.

Over the past year, Healthwatch insight has been recognised at system level, including through ICB Board discussions on women's health, dentistry and University Hospitals Tees. This reflects the value of Healthwatch's independent role in bringing people's experiences into decision making beyond one off consultations.

Messages people have consistently shared with Healthwatch, about access, communication, continuity and meaningful engagement, are now visible in current system priorities, including the growing focus on Neighbourhood Health and care closer to home.

This provides a strong foundation for continued collaboration as the system moves forward.



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'Over the past year, Healthwatch insight has been recognised at system level, including through ICB Board discussions on women's health, dentistry and University Hospitals Tees.'

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 Stockton-on-Tees this year:

Making a difference in the community



Improving access to care for Deaf people

Healthwatch Stockton-on-Tees worked with Deaf residents to understand the barriers they face when accessing health and care services. People told us about missed appointments, difficulties booking interpreters, and information that was not accessible in formats they could use.

In response, we produced accessible versions of our findings and supported the development of British Sign Language (BSL) content to help share key messages more widely.

This work has since informed further engagement and follow-up activity, including planned Enter and View work with University Hospitals Tees to explore how Deaf access is experienced in practice.



Shaping employment support through lived experience



Kinship carers and young people



Through our involvement with the WorkWell programme, we listened to kinship carers and young people, including those affected by fetal alcohol spectrum conditions. People shared how caring responsibilities, hidden disabilities and lack of understanding from employers create barriers to work and wellbeing.

This engagement highlighted the importance of flexibility, trust and tailored support if employment services are to work for people with complex lives. The insight gathered has been shared with partners to help shape future approaches in a way that reflects lived experience.

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 Stockton-on-Tees this year:

Advocacy that led to service improvement



Mental health access

Healthwatch Stockton-on-Tees supported advocacy around mental health access after hearing from a young person who experienced significant delays and communication breakdowns when trying to access support. Working alongside community partners, the issues raised were formally shared with the service.

This resulted in changes to communication processes, waiting list contact, and discharge arrangements, helping reduce the risk of people being lost from support.



“Advocacy and community support organisations play an essential role in helping people access services that can provide life changing help.

“Healthwatch’s involvement helped address communication issues, improve processes, and ensure that learning was taken seriously.”

Impact on Teesside –
Alliance Psychological Services



Listening to your experiences

Listening is at the centre of everything Healthwatch Stockton-on-Tees does. Throughout the year, we listened in different ways and in different places, recognising that people share their experiences in ways that suit them.

Some conversations happened through planned engagement and follow-up work. Others took place informally, at community events, drop-ins or during everyday conversations. Some people shared their experiences in depth, while others spoke briefly about one issue that mattered to them.

Together, these experiences helped us understand not just what was happening across local health and care services, but how it felt for people trying to access support, navigate change, or get answers when things were not working as they should.

What difference did this make?

Our Word on the Street reports played an important role in identifying emerging concerns, checking whether issues we were already hearing about were still present, and shaping where further engagement or follow up was needed.



Health and Care Ambassador Programme

The Health and Care Ambassador Programme allowed us to stay close to communities across Stockton-on-Tees.

What did we do

Ambassadors joined local events, drop-ins and sessions, working alongside trusted organisations to hear people's experiences first-hand.

Conversations were often informal and focused on everyday issues, such as access to services, making sense of health and care systems, and knowing what to do when things felt unclear.



What difference did this make?

What we heard through this programme helped shape our understanding of common concerns and ensured our wider work reflected people's real experiences.

Hearing from all communities

Reaching people who are rarely heard

Healthwatch Stockton-on-Tees worked with The Moses Project to hear the views of people experiencing homelessness, particularly in relation to end-of-life care.

What difference did this make?

People spoke openly about fear, isolation and mistrust of services, and about what dignity, safety and compassion mean to them. This work reinforced the importance of trauma aware, relationship-based engagement and the role of trusted community organisations in reaching people who would otherwise remain unheard.



"I wouldn't be here without them."

"If I'm talking about death, this is the only place I'd go."



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 16,620 people have reached out to us for advice, support or help finding services via our website, newsletters and social media platforms, as well as through our engagement team.

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



Information and signposting

We often supported people to make sense of health and care systems when things felt confusing or difficult to navigate. These conversations usually happened when people were unsure about next steps or where to turn for help.



Helping people navigate services

A significant number of enquiries related to difficulties navigating services, particularly around GP access, referrals, and follow-up appointments. People told us about referrals not being actioned, long waits with little information, and uncertainty about who was responsible for next steps.

We supported people by explaining how services work, what options were available, and where to go for further help. This insight also helped inform our wider understanding of where access and communication continued to be challenging.

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‘A patient was unhappy with the care from their GP after their own opinions were dismissed, resulting in an NHS 111 call and being admitted to a hospital ward with an infection.’

Information and signposting

Access, eligibility and understanding options

We regularly heard from people struggling to access NHS dental care, often after contacting multiple practices without success. Others contacted us for clarity around eligibility for services, vaccinations, funding decisions, and age-related thresholds.

In response, we provided clear, neutral information and signposted people to appropriate routes, including NHS 111, community pharmacies, GP practices, and relevant advice and support services.

Digital access and support

Many people told us that digital access alone does not mean digital confidence. Older people in particular described having phones, tablets or internet access but feeling stuck when systems did not work as expected or information was difficult to find.

These experiences reinforced what we were already hearing: that people need practical, human support alongside digital systems. This continues to shape our understanding of digital inclusion and access locally.

Information and signposting plays an important role in helping people feel less isolated when navigating complex systems, while also highlighting common points of difficulty that can inform future improvement.



"I have to log on to app at 6 o'clock in the morning to see if I can get an appointment for that day!"

Making change over time

Following up on drug and alcohol services

In 2024, Healthwatch Stockton-on-Tees reported on the experiences of people accessing drug and alcohol services.

Rather than treating this as a one-off exercise, we continued to follow how the findings were used and what had changed.



Making change over time

Following up on drug and alcohol services

In 2026, we revisited engagement with Bridges Family and Carer Service to understand how recommendations had been received and where improvements were visible. We also identified areas requiring further follow up with other partners, reflecting our commitment to supporting learning over time.



“The Healthwatch report provided valuable insight from a lived experience perspective on the experiences of people who use substances in the Stockton area.

“Healthwatch offers a ‘critical friend’ perspective to assist in service and quality improvement initiatives, and their findings have been considered by senior leaders in the service, as well as in the design of our new psychology pilot scheme.”

Dr Cat O’Neill, Consultant Clinical Psychologist, Change Grow Live

Making change over time

Following up on local pharmacy services

Synergise Pharmacy

As part of our ongoing monitoring role, Healthwatch returned to Synergise Pharmacy following earlier Enter and View work in 2024. The 2026 follow up identified improvements in communication, support for older people, and stock management, alongside continued system pressures such as medication shortages and GP communication challenges.

This follow up shows how Healthwatch returns to earlier work, recognising where change has happened and keeping ongoing issues visible as neighbourhood-based models of care continue to develop.



‘The public felt comfortable asking questions or requesting assistance.’

Helping people have their say

Throughout the year, Healthwatch Stockton-on-Tees helped promote opportunities for people to share their views on local and national health and care changes.

This included signposting consultations and surveys on issues such as gluten free prescriptions, changes to the NHS dental contract, and regional plans to improve access to dental services. Sharing these opportunities helped people understand what was changing and how they could feed into decision-making processes.

Volunteers at the heart of our work

Our fantastic volunteers have given 382 hours to support 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:

- Visited communities to promote our work
- Collected experiences and supported their communities to share their views
- Carried out enter and view visits to local services to help them improve



We want to hear your voice

Volunteers at the heart of our work

Volunteers play a vital role in ensuring Healthwatch Stockton-on-Tees remains independent, community-focused and grounded in lived experience.

Our Board of volunteers brings a wide range of skills, knowledge and local insight, helping to guide our work and ensure the voices of local people remain central to decision-making. Board members provide challenge, support and oversight, and help ensure our work reflects what matters most to communities across Stockton-on-Tees.

Alongside this, our Health and Care Ambassadors commit their time to engaging with people in communities, supporting conversations about health and care, and helping us stay connected to everyday experiences. Ambassadors help support access to information, listen to concerns, and highlight where people experience barriers, as well as what is working well.

Together, our volunteers support Healthwatch's role in listening to people, sharing lived experience, and contributing to learning and improvement across local health and care services. Their involvement strengthens our ability to reach different communities and ensures our work remains rooted in real life experience.



Volunteers at the heart of our work

Reflecting on impact: recognition and moving forward together

This year, we welcomed Colleen Metcalfe to the Healthwatch Stockton-on-Tees Board.

Colleen brings professional experience from her work with Starfish Health & Wellbeing, where she supports individuals accessing local health and wellbeing services, including working alongside young people as they navigate employment and support routes.

Colleen is deaf and brings lived experience of the challenges faced by the Deaf community in accessing health and social care. She is keen to help highlight these issues and support improvements in accessibility and communication.

Colleen is committed to strengthening the voice of local residents and contributing to meaningful service improvement across Stockton on Tees. Outside of her professional work, she is a poet who performs in both British Sign Language (BSL) and spoken English and also translates and performs songs in BSL at open mics and festivals across the country.



"I'm overjoyed to have been invited to stand with Healthwatch on their Board and hope to bring a fresh perspective to their important work. I have much to learn. I also have much to offer."

Finance and future priorities

We receive funding from Stockton-on-Tees Borough 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	129,000	Expenditure on pay	127,862.58
Additional income	19,754	Non-pay expenditure	4,963.39
		Office and management fee	28,138.02
Total income	148,754	Total Expenditure	160,963.99

Additional income is broken down into:

NENC Integrated Care System (ICS) funding:

Healthwatch across North East & North Cumbria also receive funding from our Integrated Care System (ICS) to support new areas of collaborative work at this level.

Purpose of ICS funding		Amount
Stockton-on-Tees 2025/26: Network funding		£4,000
Stockton-on-Tees: Area Coordinator		£12,445
Additional Projects		£3,309

Finance and future priorities

Healthwatch Stockton-on-Tees will continue to focus its resources on work that reflects what people tell us matters most, while remaining flexible and responsive as the system continues to change.

Our priorities:

Access and communication in hospital care

Building on our Deaf community work, we will carry out Enter and View activity at University Hospitals Tees (North and South Tees), with a focus on access, communication and reasonable adjustments.

Neighbourhood Health

We will listen to how neighbourhood-based models of care are developing locally and how these changes are experienced by people, particularly those with complex needs or barriers to access.

Voices hardest to hear

We will deepen our engagement with people who are less often heard, including people experiencing homelessness, working alongside trusted organisations to ensure lived experience informs learning and improvement.



Statutory statements

People First Conference Centre, Milbourne Street, Carlisle, Cumbria, CA2 5XB. Registered Charity No: 1184112.

Healthwatch Stockton-on-Tees uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

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

Strong governance is at the heart of Healthwatch Stockton-on-Tees' work, helping ensure we remain independent, transparent and focused on what matters most to local people.

During 2025–26, the Board met in person on four occasions, with additional meetings held as needed to review progress, agree priorities and reflect on what people were telling us about local health and care services.

The Board plays an active role in guiding Healthwatch's work, including agreeing areas of focus, overseeing reports and follow-up activity, and ensuring learning from lived experience is shared appropriately. Alongside this, the Board fulfils its statutory responsibilities, including governance, safeguarding, conflicts of interest, health and safety and financial oversight.

By bringing together lived experience, local knowledge and professional insight, the Board helps ensure Healthwatch Stockton-on-Tees continues to work in the public interest as a strong, independent voice for local people.

Methods and systems: our approach

Healthwatch Stockton-on-Tees uses a range of listening methods to understand people's experiences of health and care and ensure those experiences are shared where they can make a difference.

We recognise that people share their views in different ways. Our approach reflects this by combining planned engagement with ongoing, informal listening, allowing people to take part in ways that suit them.

We gather insight through community engagement, targeted work with specific communities, Enter and View activity, and everyday conversations. This helps us respond to emerging issues as well as carry out focused work linked to our priorities.

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Methods and systems: our approach

Alongside listening, we work within local and regional systems to ensure learning from lived experience reaches the right conversations. Independence is central to this work, allowing people to speak openly and ensuring insight is brought together carefully, focusing on shared themes rather than individual cases.

By combining different ways of listening with system engagement, Healthwatch Stockton-on-Tees helps ensure decisions are shaped by real experiences and everyday realities.

Looking ahead

Healthwatch Stockton-on-Tees will continue to focus on listening to people's experiences, following up on what we hear, and ensuring access, communication and inclusion remain central as health and care services continue to change.

Building on the work set out in this report, we will continue to listen closely to how care is experienced locally, including access to hospital services, neighbourhood-based care, and the experiences of people whose voices are hardest to hear. This approach will help ensure lived experience continues to inform learning and improvement across the system.

Thank you to our communities

Thank you to everyone who took the time to share their experiences with Healthwatch Stockton-on-Tees during the year. We are grateful to the individuals, families and carers who spoke openly with us, often about sensitive or difficult experiences.

Your insight helps ensure local voices remain visible, understood and taken seriously, and continues to shape our work.

Thank you to our partners and volunteers

We would also like to thank our partners, community organisations and volunteers who supported our work throughout the year. By working alongside trusted organisations and committed volunteers, we are able to listen in ways that feel safe, accessible and meaningful.

Your support helps Healthwatch Stockton-on-Tees remain independent, responsive and rooted in real life experience.

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Responses to recommendations

All our reports throughout the year have received responses from the relevant partners and recommendations made will form part of the future planning and commissioning of services. 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:

- Health and Wellbeing Board
- Health and Wellbeing Partnership
- Teeswide Safeguarding Adults Board
- Adult Social Care & Health Select Committee
- Health & Wellbeing Forum
- Integrated Mental Health Steering Group
- Joint Health & Wellbeing Strategy Working Group
- Healthwatch England Leads Meeting
- North Tees & Hartlepool Foundation Trust Council of Governors

We also take insight and experiences to decision-makers in our North East & North Cumbria ICS:

- Integrated Care Partnership Sub Committee Stockton-on-Tees
- Healthwatch NENC Network Operations Group
- NENC ICB Quality & Safety Committee
- NENC Primary Care Strategy & Delivery Sub Committee
- NENC Integrated Care Board Patient Voice Committee

We also share our data with Healthwatch England to help address health and care issues at a national level.

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Representing Your Voice at Every Level

Healthwatch Stockton-on-Tees is proud to be represented on the Stockton Health & Wellbeing Board by our Chair, Peter Smith.

In 2025/26, Peter:

- Provided leadership to our Executive Board and team
- Helped shape key recommendations and ensured our reports are credible and evidence-based
- Shared updates from our work plan at strategic meetings
- Supported strong service delivery
- Represented us at local and regional forums

We're also represented on the North East & North Cumbria Integrated Care Partnerships and Boards by Natasha Douglas (Manager) and Peter Smith (Chair).

Additionally, Natasha Douglas represents Healthwatch Tees in the NENC Network as the South Regional Coordinator, helping ensure local voices are heard and acted upon across the wider region.



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Enter and view

Location	Reason for visit	What you did as a result
Elm Tree Medical Centre (GP Practice)	• Understand patient experience in primary care • Identify examples of effective practice	• Gathered insight on what works well • Learning to inform future reporting and share good practice
Bridges Family Carer & Support Service	• Follow-up on 2024 engagement relating to drug and alcohol services • Understand whether experiences had improved	• Captured updated experiences from carers and families • Shared findings with partners to support ongoing improvement • Ensured previous concerns remained visible
Synergise Pharmacy	• Follow-up on earlier Enter and View work (2024) • Understand what had changed in practice	• Identified improvements in communication and patient support • Highlighted ongoing challenges (e.g. medication supply, service coordination) • Shared findings to support continued learning

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2025 – 2026 Outcomes

Across 2025–26, Healthwatch ensured people's experiences influenced learning and improvement across local and regional health and care.

Project/activity	Outcomes achieved
Mental health	Experiences shaped conversations about recovery, access and safe transitions
Access to care	Insight into GP access and digital systems highlighted barriers around communication, continuity and digital exclusion
Information and communication	Feedback supported clearer messaging around pharmacy services and access routes
Inequality and inclusion	Work with Deaf residents, people experiencing homelessness and carers strengthened understanding of barriers to care
Follow-up and accountability	Previous concerns (e.g. pharmacy, drug and alcohol services) continued to influence improvement over time
Service improvement	Advocacy contributed to changes in communication and follow-up processes within mental health services
Influence across the system	Insight shared locally, regionally and nationally to support decision-making based on real experiences

Hosted by People First



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