



Overview Report 2025-2026

Working together for change

Raising voices across the North East and North Cumbria

This report gives an overview of the diverse work that the Healthwatch NENC network has been involved in throughout the year.

Working together for change

Raising voices across the North East and North Cumbria

This report 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



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



“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.”



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.



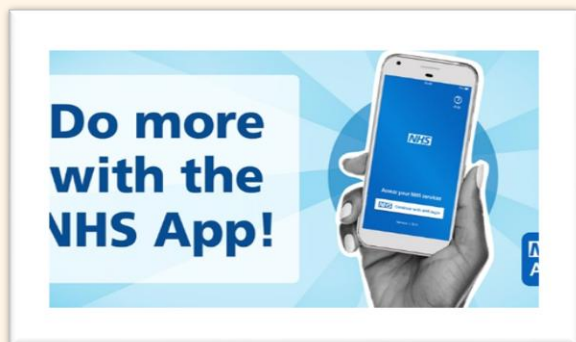
“Talking about end of life isn't easy, you need time and people you trust.”

“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

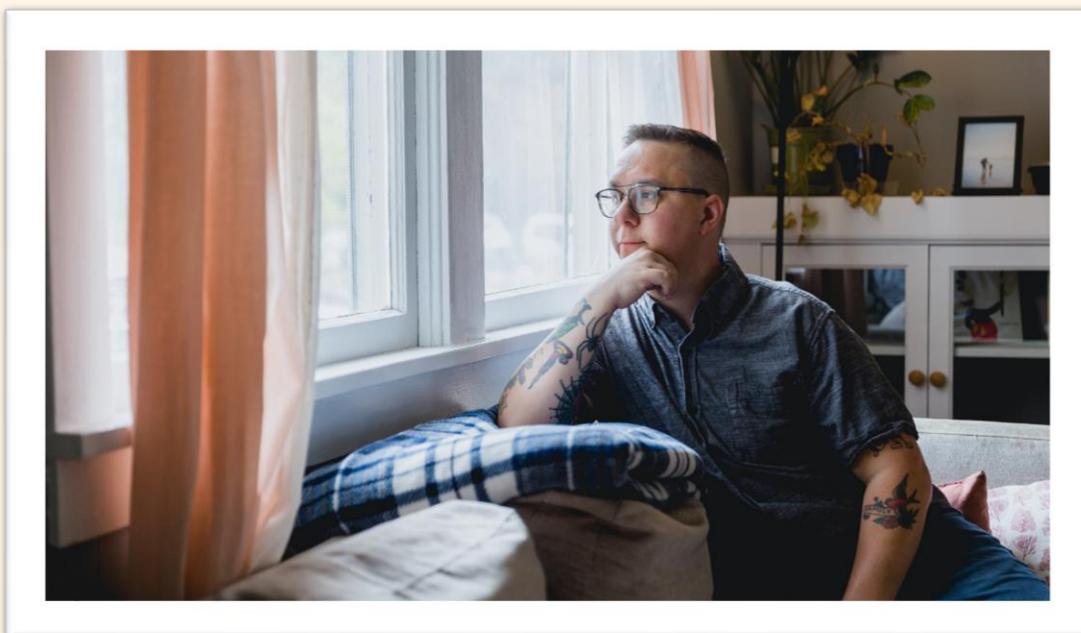
Mental health rehabilitation: what helps people recover – and what puts them at risk

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.

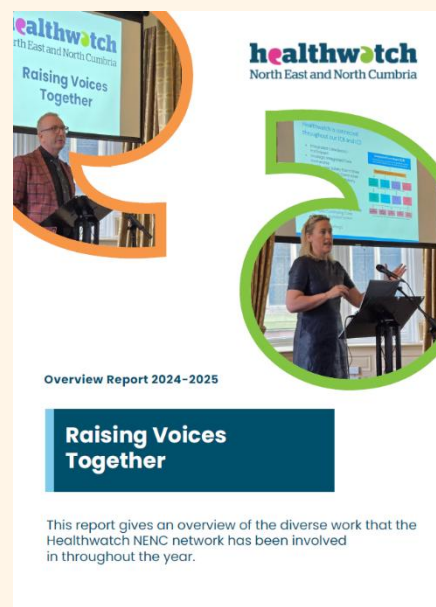
By connecting local insight with regional and national conversations, Healthwatch NENC helps ensure decisions are shaped by real lives. This can be seen clearly in areas such as dentistry, where people's experiences have helped drive change.

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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Healthwatch North East & North Cumbria Network

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