

## Experiences of health and social care in Sheffield

### Key insights from February – March 2026

Between February and March 2026, we gathered insights from 253 people using health and social care services across Sheffield. People shared a mix of experiences, with many positive examples of care, alongside some less positive accounts. We heard that AI systems used in some GP practices to manage patient calls had made it difficult for some people to book appointments. We also heard about parking issues across a range of health and care services making it harder for people to access care. Additionally, people told us that when requesting information in accessible formats, it wasn't always available.

### GP services

Between February and March, 112 people shared their experiences of 38 GP practices across the city. Of these, 47 individuals (42%) provided positive feedback about their GP practice. Patients reported receiving good care and treatment, with 12 specifically mentioning timely access to appointments.

The majority of the less positive feedback focused on patients feeling unhappy with the quality of care and treatment received. We also heard about difficulties accessing GP services, including issues with AI systems used in some practices to manage patient calls. Patients reported being unable to speak directly with staff to book appointments and were instead sent booking links to their mobile phones by the AI system. However, some patients did not have a smartphone or internet access, which prevented them from being able to complete the booking process. When calling back to try and report these difficulties, the AI system did not transfer them to a receptionist despite repeated requests, leaving them unable to secure an appointment.

Additionally, we heard about other GP practices whose telephone systems do not allow patients to be held in a queue at busy times. Instead, callers are directed by an automated voice to use online services and the call is ended, leaving patients unable to book an appointment by phone.



“Dr listened to concerns was proactive in diagnosis.”

“When you phone my surgery it’s an AI that answers. (...). So it’s impossible for me to get through by phone.”

“Want to speak to an individual instead of a robot.”

“I will now have to call NHS 111 for an appointment.”

## Hospital Care

A total of 79 patients, family members, and carers shared their experiences of hospital care. Of these, 42% (33 people) spoke positively about the good quality care and treatment they received across a wide range of services, including Physio, Haematology, Hadfield 6, Phlebotomy, Cardiology, Eye Clinic, Endoscopy and Gynaecology.

The majority of the less positive feedback shared, centred around patients feeling unhappy with the quality of care they had received as an in, or outpatient, as well as lengthy waiting times to access certain services.

Suggestions were shared on how A&E facilities could be improved to support patients during long waiting times. Feedback included ensuring vending machines were in working order, providing access to mobile phone charging points and offering a wider range of healthier food options to purchase, such as fresh fruit. It was also suggested that if there was a possibility of introducing a system that allowed patients to leave the waiting area for a short period of time, to be able to get some fresh air, or purchase snacks or drinks from the hospital dining areas, it would be greatly received.

People contacted us to raise concerns about parking. We heard that it is often difficult to find a space close to the Hallamshire and Northern General sites, creating accessibility challenges for patients attending emergency, outpatient, and inpatient services, as well as for their relatives and carers. Some individuals reported having to drive around for extended periods in search of a space, which they found stressful. Concerns were also raised about the cost of parking, which some felt was too high. In addition, some car parks were described as poorly lit, leaving some people feeling unsafe, particularly during evening hours and at night.

Wider feedback was also shared by disabled patients who reported having to rely on taxis to attend a range of healthcare appointments, including hospital, GP, and dental visits, due to a lack of accessible parking spaces available nearby.



“I have full trust in my consultant and am very grateful to have such kindness.”



“Better access to food other than junk food.”

“Eventually found one a distance away from the department? Which adds to the stress when your loved one is in A&E.”

“Car parks not well lit. Some scary areas in the car parks.”

“This is impossible, have to resort to expense of an Uber.”

## Barriers to accessible information and inclusive health and care access

We heard about access to easy read documents and sometimes when requesting information across different health and care services, preferred formats weren't provided. In some cases, it was reported services stated easy read versions weren't available or staff did not know what easy read information was.

We visited the Royal Society for the Blind, where people shared their experiences of services - digital exclusion was a consistent theme raised. People described how online booking systems, digital forms, and the NHS app made independent access difficult. As a result, tasks such as arranging appointments, receiving information, or contacting providers was challenging. Another key issue was when attending various appointments, patients were sometimes asked to complete paper-based forms, given leaflets, or food menus (if admitted to hospital), often with no offer of support or staff assuming relatives or carers could read the information for them.

We went to the Cathedral Archer Project where some of the people we spoke with shared that they were living with ongoing health conditions. People emphasised the importance of being able to access a GP and a dentist onsite at the project as we heard that people often struggled to access consistent support due to their current living situation. We also heard that when people were referred for secondary care appointments, some said they were not able to afford the travel costs to get there. They were not aware that they could claim travel expenses through the Healthcare Travel Costs Scheme and as a result, missed out on treatment and follow-up care.

We are regularly out in the local community speaking to members of the public about their health and social care experiences. This period we also visited [Parson Cross](#) Community Development Forum and [SOAR](#).

## Appointment reminders

Patients shared how helpful it would be if all health and care services sent appointment reminders by text message or through their preferred

"The hospital staff member I spoke with didn't know what easy read was."

"I don't like it when people give you leaflets and they say that your daughter can read them for you."



"The Dr and Dentists who come here don't judge us."

"The doctor referred me to NG but am not able to go because it is too expensive."

"I had a cancer appointment yesterday but because I had forgotten to go before, now the tumour has grown."

method of contact as often reminders are not sent. They felt this would also help reduce the number of missed appointments- 'Did Not Attend' (DNA's) experienced by services.

## Sheffield Health Partnership University (SHPU)

16 people shared their experiences of Sheffield Health Partnership University services. 12 people (75%) shared positive examples of good quality care and treatments received at various services including Burbage Ward, Talking Therapies, Decisions Unit, Sheffield Adult Autism and Neurodevelopmental Service (SAANS), Homeless Assessment Support Team (HAST), Community Mental Health Team (CMHT) and the Memory Clinic. Less positive feedback shared centred around difficulties in accessing some mental health services, the quality of care received and long waiting times to access autism and ADHD assessments.

"Can't thank the staff enough...they have all been very brilliant and supportive to my recovery."



## NHS Dentistry

During this period, 34 people shared feedback related to NHS dentistry. Of these, 21 people shared positive sentiments about their dentist and the care and treatments they had received. A large proportion of these responses were shared by children and young people we spoke with at our [Wybourn event](#) in February.

"The dentist put me at ease and explained everything."

A further four people shared negative experiences, citing difficulties booking appointments and poor communication. In addition, nine people reported challenges in being able to find an NHS dentist.



We regularly contact dentists across Sheffield to get an accurate picture of which practices are accepting new NHS patients so we can signpost people to them. After we called round in March, we discovered eleven practices across the city were able to offer appointments to new adult NHS patients which was slightly better compared to our previous call rounds.



## Impact from our last briefing (Dec 2025- Jan 2026)

Sheffield Integrated Care Board (SYICB), Sheffield Teaching Hospitals (STH) and Sheffield Health Partnership University (SHPU) have responded to our [last briefing](#) outlining how they plan to address areas for improvement.

## Response from Sheffield Integrated Care Board

**GP Services-** Good to hear the positive experiences of care reported.

**Urgent care appointments** – Many practices use a triage process to ensure that patients are seen based on their clinical urgency, we understand that may not always correspond with patient perception of need but is based on the clinician’s assessment. In addition, where necessary urgent patients may be asked to visit other services to be seen.

**Long Waits for non-urgent appointments** – Demand for GP appointments is high. Practices are working hard to see patients and have reviewed their processes and recruited new staff groups to help with this. In December there were 350, 580 appointments in GP practices (more than 1 appointment for every 2 residents of Sheffield), 46% were on the day the patient contacted the GP, 68% within 1 week and 80% within 2 weeks. We understand that delays can be frustrating but, practices prioritise appointments according to clinical need and aim to see people as soon as possible.

**Difficulties using online triage/no internet access** – While many patients find online consultation tools a quick and convenient way to contact their practice we understand this does not suit all patients, patients can also contact their practice by phone or in person. When you use the phone or visit the practice a member of staff may ask you questions so they can fill in an online consultation request on your behalf so that all requests can be triaged consistently. If patients are not able to request an appointment in person/online they can raise this with the practice or to the ICB.

**Problems arranging interpreters** – We commission a comprehensive service i.e. phone, video and online for primary care however, demand regionally is high and unfortunately sometimes this means sometimes an interpreter isn’t available when needed. We know this is very frustrating for patients and GPs and we are currently looking at innovative ways to increase access.

## Response from Sheffield Teaching Hospitals

**Long waiting times to access care:** Services are making progress to reduce waiting times, and all teams will be reminded to proactively keep patients informed with regular updates and clear contact points while they wait.

**Health passports not reviewed or adjustments not met:** The Trust's Learning Disability and Autism (LDA) team is strengthening awareness, training, and systems to improve the consistent use of health passports, including targeted staff education, mandatory training, EPR prompts, audits, and accessible patient information. They can provide targeted training for teams if specific areas are identified to experience issues and are attending an upcoming Patient Experience and Engagement Group (PEEG) meeting to present about supporting patients with learning disabilities and/or autistic patients.

**Hand Centre reception appearing unstaffed:** Reception is staffed during core hours, with self-check-in used only when staff are briefly unavailable. However, the team have advised that alternative assisted check-in options, accessibility improvements, and potential volunteer support are being explored to better meet patient needs.

**Difficulty accessing care at home after discharge (STIT):** Sheffield City Council has improved response times for the STIT service, and provided clarification on the eligibility criteria for the service (full details in the paper). The service remains targeted at medically fit patients who are able to engage in short-term rehabilitative support.

## **Response from Sheffield Health University Partnership**

Thank you for sharing this briefing and for continuing to gather and highlight the experiences of people using health and social care services across the Sheffield. We have welcomed the opportunity to reflect on this feedback and use it to inform improvements to our services.

It is encouraging to see that the majority of feedback shared about Sheffield Health Partnership University NHS Foundation Trust services was positive, with people highlighting good quality care and treatment received across a range of services including Beech, Stanage Ward, the Decisions Unit, Eastglade and Northlands. We are pleased that patients felt supported by our teams, and we will ensure this positive feedback is shared with staff across these services, in order that staff benefit from knowing what is working well for the communities they serve.

We also recognise the feedback from people who reported difficulties when trying to access the right mental health support. Access to timely and appropriate support remains a key priority for the Trust, and we continue to work closely with system partners across Sheffield to improve pathways and transform in order to ensure people are directed to the right service at the right time to receive the right support.

It may also be helpful to clarify that Sheffield Health Partnership University NHS Foundation Trust does not provide ADHD assessments for people under the age of 18, as these are provided through children and young people's services in Sheffield.

We continue to be grateful to everyone who has taken the time to share their experiences through Healthwatch. Service user, family and carer feedback plays an important role in helping us understand what is working well and where we need to channel our focus to continue in improving mental health services for the people of Sheffield.

**Patients who contacted NHS 111 (option 2) were advised to attend A&E but were unable to do so:** The NHS 111 Mental Health Option is available 24 hours a day, seven days a week for all ages. People can use this number if they have an urgent mental health concern themselves or about someone they know. Upon accessing the service, callers will be transferred to a dedicated mental health call handler for Sheffield who can signpost, manage queries, and if necessary refer onto the appropriate team for assessment or follow up. Urgent calls for care and support where there is a mental health crisis will be referred to the Urgent and Crisis Service, ensuring the most urgent calls are prioritised. All other referrals for mental health support and help will be picked up by the Community Mental Health Team or Primary and Community Mental Health Service.

However, in emergency situations where there is an immediate risk to life, the call handler will advise to contact 999 or go to A&E.

The 111 service is available to anyone in England facing a mental health crisis. A mental health crisis could include (but is not limited to):

- Changes to your mood
- Withdrawing from people (close family, friends, or work colleagues)
- Not taking care of yourself like you usually would
- Having increased thoughts about your life not being worth living
- Excessive worry
- Feeling out of control or unable to cope
- Feeling anxious about leaving the house
- Hearing voices or seeing things that others can't
- Thinking about harming yourself

This summary of key issues is a snapshot of what we are hearing about. We want to reflect the experiences of people who share their stories with us, and we hope that it can help services, and commissioners of services, by indicating potential areas of focus. It is based on:

- Experiences that members of the public share with us through our information and advice service
- Feedback shared by voluntary sector partners who support clients in Sheffield
- Stories shared through Care Opinion

**Want to share your own experience? Get in touch**

Online: [healthwatchsheffield.co.uk](http://healthwatchsheffield.co.uk)

Phone: 0114 253 6688

Email: [info@healthwatchsheffield.co.uk](mailto:info@healthwatchsheffield.co.uk)

Text: 07415 249657

