

Quarterly Report

July–September 2025

Heard from **1028** people about their views and experiences of health and care



Started conversations with health and care partners about the **future of independent public and patient voice** in Sheffield



Helped **159** people with enquiries about health and social care services



Held a **Health and Wellbeing Community Fun Day** in Richmond Park Estate, in partnership with Great Places Housing Group



Gave out our **Healthwatch Heroes Awards**, to individuals and organisations who are doing great work to involve Sheffield people in improving health and social care services



Connected with our Community Partners at our **Community Voices** event, celebrating their work together



1. Introduction

Last quarter, we shared how government announcements had put the future of Healthwatch into question; while it remains the case that the government is intent on closing local Healthwatch, the legislative change required has not yet progressed. This means that for the time being, our team is getting on with our work – and what a busy time it's been!

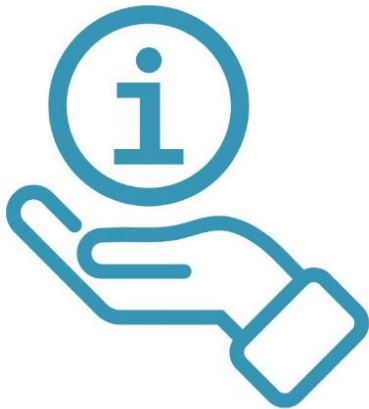
This quarter we've heard from more than 1000 local people about their experiences of health and social care. Our outreach activities have helped more than 300 people connect with health and social care information that supports them, and more than 500 people have looked at information articles on our website. Alongside that, our Community Voices Event brought people together from across Sheffield; we celebrated with individuals and organisations who we know are making a real difference to people's lives by speaking up and sharing their stories, and helping our health and care services to improve.



Another highlight was the Community Health and Wellbeing Fun Day in Richmond Park Estate. Working with local residents and Great Places Housing Group, the Healthwatch team planned this event to connect services into the area, as well as providing a day of fun activities for people to enjoy. From Bollywood dancing, to Chair Yoga, martial arts and a bouncy castle, there was something for all ages to get involved in.

We continue to firmly believe in the power and importance of independent public and patient voice – in section 10 of this report we say more about the work that we've been doing to highlight this, following the government announcements. We've been part of national and local conversations about what the future holds, advocating strongly that both individual and collective voices, people's stories, and relationships built through spending time with and alongside communities, are vital for shaping services that work for everyone.

2. Enquiries, Information and Advice



- Giving information about health and social care services is one of our statutory duties.
- People can get in touch with our [information service](#) by email, phone, and at our weekly in-person drop in. We also give information when we are out and about at community events.
- We can help with things such as people's rights to treatment, what services may be available to them, or how to raise a concern about a negative experience they have had.
- People who come to us for information also share feedback with us which helps shape the rest of our work.

159

contacts with our
information and
advice officer

573 visitors

to our website looked
at the information
pages

21%

of visitors to our website
looked at information
articles

Examples of what we've heard through our Information Service this quarter

Right to Choose: Some patients reported their GP had advised them to research different providers without any guidance or direction, leaving them unsure of where to start.

Experiences of people living with chronic pain: People were referred to various services that couldn't provide support, or when referred to an appropriate service, often faced long waiting times to access it.

Mounjaro injection: Some patients told us they experienced difficulties accessing this medication for weight loss due to GPs waiting for clinical guidance from South Yorkshire Integrated Care Board (SYICB).

Where have we signposted people this quarter?



Case Study

Accessible Information Request

We met Joyce* during a visit to the Grace Church Café in Richmond. It was her very first time attending the café and she told us how much she was hoping to make it a regular part of her week. Joyce explained that she was eager to socialise and build new friendships.

Joyce shared that she didn't use the internet which made it difficult for her to find out about local social groups, lunch clubs, or community activities. She mentioned she had heard of Age UK and some of the support services they provided but couldn't contact them as she didn't have their details.

We were able to give Joyce the information she needed as well as details of other relevant local services such as The Link Community Hub and SCCC's Good Neighbours Scheme. Joyce stated that she was looking forward to meeting new people and making new connections.

*Name has been changed

3. Website

This quarter we had **2,690 visitors** to our website, totalling **10,594 page views**.



Most popular pages:



[Sign the petition](#)

[Invitation to our community fun day](#)

Info articles with the most views:



[What can pharmacy first do for me?](#)

[What is social prescribing?](#)

We didn't share any new blogs on our website this quarter, but we did share news articles to help people stay up to date on what's happening in the world of health and social care.

This includes updates on Healthwatch England and the local Healthwatch network in the current changing landscape, and the results of the latest [CQC inpatient survey 2024](#).

4. Children and Young people

Speak Up

This year our Speak Up microgrants programme has been focussed on children and young people. Over the summer our new Speak Up project partners started planning their projects, or carrying them out. We are working with:

- Sheffield Young Carers
- Learn Sheffield
- Helping Hands Autism
- Element Society
- Sharrow Community Forum
- MASKK (Manor After School Kids Klub)



Some of these – like Sheffield Young Carers – completed their activities and workshops over the summer holidays, and will begin writing up their findings soon. Others – like Learn Sheffield – will be carrying out their activities in the autumn school term.

The projects cover a wide range of topics in health and social care. We are excited to start sharing some of these findings – and the lessons we can learn about better supporting children and young people in Sheffield – over the coming months.

5. Community Partnerships

Community Voices Brunch Event



On 2 July 2025, we hosted our Community Voices Brunch Event to celebrate our [Community Partners](#) and 'Healthwatch Heroes'. Their contributions have helped to amplify local voices, strengthen influence, and drive meaningful change. The Lord Mayor handed out certificates and awards to recognise their dedication, and gave a passionate speech which highlighted that tackling health inequalities starts with hearing people's experiences.

The event also included a mini-workshop on community journalism, shining a light on the importance of storytelling in bringing about change and elevating community voices. People then put what they had learnt into practice; working in groups to create the front page of a newspaper, to highlight issues and good practice in health and social care.



6. Projects, Involvement & Engagement

In addition to hosting our own events, we go to the regular activities and events held by other organisations. This enables us to hear people's experiences, raise awareness of how we can help people, and highlight the impact of sharing feedback with us. This quarter we heard from people of all ages in a range of settings.

Housteads Residential Care Home



In July, we joined residents and staff from Housteads Residential Care Home for one of their regular coffee mornings at The New Anglers pub.

Residents and staff shared their views on what was good and bad about the care home, and what activities they wanted to do to help improve their health and wellbeing.

Residents said they liked having regular activities, entertainment and trips, although some would like to have more choice of activities. There was also praise for the carers and food at the home. Some residents said they felt safe, well looked after and have formed close friendships with both staff and other residents.

Sheffield Voices

In September, we visited Sheffield Voices, a self-advocacy group for adults with learning disabilities and autistic adults. We met the group at a café in Hillsborough, to learn about their experiences of using services, including GPs, dentists, opticians, hospitals, and social care.

Members of the group and support staff shared their views. They highlighted the importance of people being treated with kindness, respect, and understanding. Concerns included difficulties accessing care including NHS dentists, a lack of disability awareness among professionals, and barriers to independence in some care settings. They also shared ideas for improvement, such as increasing support for health passports, creating more independent living opportunities, and ensuring follow-up, and having more accessible communications.

We returned to the group later that month with information about which dentists in Sheffield were currently taking on NHS patients, and details of how to access the Sheffield Community and Special Care Dentistry service.

Recovery Walk 2025



This quarter we attended the Recovery Walk 2025, which aimed to support individuals affected by drugs and alcohol and help to raise awareness. The event provided an important platform to hear directly from people with lived experience of addiction, and helped us to better understand the personal journeys, challenges, and progress made in recovery.

We engaged with a range of local organisations including Project 6, Likewise, Shelter, Sheffield City Council, Sheffield

Inclusive Recovery City, Way Through, The Greens, and others. These conversations helped strengthen our understanding of the support available, and how we can work together to provide more meaningful and inclusive support to individuals and communities affected by drugs and alcohol.

Our Dementia Commitments (ODC) workshop

In September we attended the Age UK event, Our Dementia Commitments (ODC) workshop, at Outram Fields Care Home. The workshop connected organisations using the ODC Sheffield approach, shared insights from people living with dementia in the city, and highlighted where improvements could be made.

BloomElle “Know Your Numbers” Event

We informed people about our service at the BloomElle event in September, which aimed to raise awareness of cardiovascular health in women from the global majority.

The event reinforced the importance of early action, awareness, and targeted support to address health inequalities and improve outcomes for underrepresented communities.



Just Do It

This summer, we had a stall at the Just Do it event which the local authority runs annually for children and young people placed under their care. We offered information and advice, craft activities, and gathered feedback from children, young people and their relatives and carers. Sheffield Children's Hospital was rated highly by children who had used their services.



Food Squad

We visited the Food Squad twice in September. The community kitchen serves a weekly vegan meal for disadvantaged groups, in a supportive environment at the Showroom Workstation.

During our visit, people experiencing mental health challenges and homelessness shared their experiences of health and social care services. We learnt about the challenges they faced, including a lack of mental health support, not feeling listened to or valued, difficulties accessing GP appointments, and poor communication between services.

SADACCA

During September we visited the adult day care centre at SADACCA (Sheffield and District African Caribbean Community Association). People shared a range of positive and negative experiences of services including GPs, dentists, pharmacies, opticians, hospitals, and social care.

Their feedback reinforced the importance of consistency in care worker, clear communication, and feeling respected and listened to across all areas of health and care.

A Neighbourhood Focus on Health and Care: Wybourn and Richmond Park Estate



This quarter, we continued working on our Great Places funded health and care information projects in Wybourn and Richmond Park Estate. We visited many local groups to get input into the design of our projects, and heard about people's experiences of care, local support, and gaps in provision. This work aligns with our neighbourhood focus on health and care.

Wy-Fest summer festival:

In August we had a stall at the Wy-Fest summer festival at Wybourn Primary School, which was organised by Wybourn Works.

The event brought together local residents, community groups, and partner organisations to celebrate achievements in employment, training, and community development.

People shared their feedback on a range of services including GPs, mental health support, local hospitals and social care. We heard about positive experiences of local services and concerns about waiting times and communication between services.

We connected with other stakeholders, including housing providers, local councillors, representatives from the Department for Work and Pensions (DWP), and community health initiatives. These connections will support future collaborative work in the area – next quarter we will be spending more time in Wybourn as part of our work with Great Places.



Health and Wellbeing Community Fun Day:

During visits to groups near the Richmond Park Estate, we asked people how they would like to connect with services to get health, social care and wellbeing advice. There was great support for the idea of having a large community event. So, in August, we organised a Health and Wellbeing Community Fun Day at the Richmond Park & Birklands Community Centre.

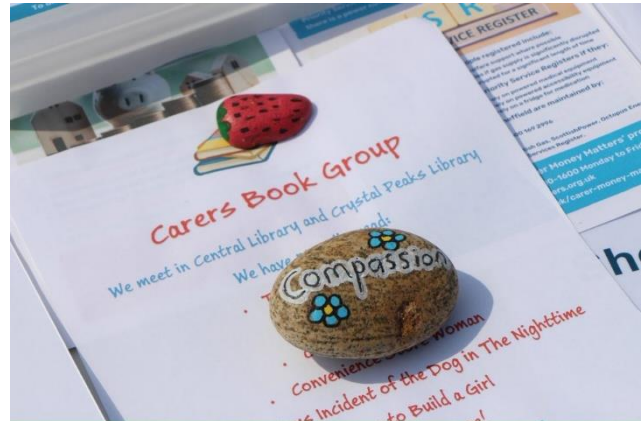
The fun day was designed around what local people told us they would like to see and everything was free. There were 27 organisations there to give out information and advice and promote activities, and an offer of NHS health checks and first aid workshops. The event was attended by over 150 local people, including residents from Housteads Care Home.



Children enjoyed activities such as the bouncy castle and face painting, whilst adults participated in fitness activities such as chair yoga and Bollywood dancing. People of all ages enjoyed a martial arts performance and taster session, and visited our stall to give feedback on health and social care services and spin our prize wheel.

Impact

By asking people in the Richmond Park Estate what topics they wanted more information or support with, we were able to invite the right services to help them. Statutory and voluntary sector organisations made connections with people locally and provided advice and signposting directly in the community.



7. Reports

What have we been hearing?

We published one of our regular intelligence briefings this quarter:

[June – July 2025: What have we been hearing?](#)

We continue to raise issues that impact people locally, like interpreter support and provision of continence supplies.

Palliative and End of Life Care

We met with Sheffield Teaching Hospitals to hear about their work to improve palliative and end of life care, and discuss their response to our report recommendations. The response has now been [published on our website](#).

Impact

In response to our report on Palliative and End of Life Care, Sheffield Teaching Hospitals have shared a number of actions that they are taking to improve the experiences of people in their care. These include actions that will help staff be more confident and skilled in delivering end of life care across all wards – not just specialist wards. For example, by developing a network of end-of-life champions who will disseminate information and education to staff in their area, as well as developing a central internet hub for staff to access end of life care guidance, resources and updates.



8. Quality Accounts

Every year, NHS Trusts produce a Quality Account. These documents report on the quality of service offered by the Trust, and reflect on progress and improvements they have made to the care they deliver.

We are invited to submit a stakeholder response to the Quality Accounts, which is then included in the published documents. We use this response to reflect on the priority objectives the organisation sets, and how they describe involving patients, families, and the public in their work. Our response reflects on the feedback we have received over the previous year, and public perspectives from our volunteers.

This quarter the Quality Accounts for 2024-25 were published:

- [Sheffield Teaching Hospitals NHS Foundation Trust](#)
- [Sheffield Children's NHS Foundation Trust](#)
- [Sheffield Health and Social Care NHS Foundation Trust](#)
- [Yorkshire Ambulance Service NHS Trust](#)
- [St Luke's Hospice](#)

9. Health & Care Public Forum (Sheffield)



This quarter our regular Health and Care Public Forum met twice. We run the patient and public forum on behalf of Sheffield Health and Care Partnership, to help inform their work.

In July, Forum members met in person to discuss national developments taking place to abolish Healthwatch England and local Healthwatch. They expressed concerns around an apparent lack of understanding in national reports of how local Healthwatch work with communities, and the increased risk of digital exclusion if the NHS app becomes more central to giving feedback.

At the meeting in September, representatives from Sheffield Teaching Hospitals NHS Foundation Trust spoke about the hospital's Patient Safety Incident Response Plan (PSIRP), and captured the Forum members' views on which patient safety themes should be prioritised within the Plan. The Forum felt that having the right culture was a particularly important factor in patient safety, as both patients and staff should feel comfortable speaking up when something isn't right.

10. Local decision making and the Healthwatch role

Last quarter the NHS 10 Year Plan was published; alongside the National Review of Patient Safety (the Dash report). It gave news of the plans to close local Healthwatch, and Healthwatch England.

In relation to the Healthwatch role it says:

- The work of local Healthwatch bodies relating to healthcare will be brought together with ICB and provider engagement functions (chapter 5).
- Individual provider boards will be asked to ensure they have robust mechanisms in place to collect and use patient feedback, ensuring it is actively fed back to individual clinicians and clinical teams. This will be the norm across the NHS by 2026.
- Local authorities will take up local Healthwatch social care functions

We are concerned about the loss of an independent public and patient voice; along with 130 other local Healthwatch we wrote an [open letter](#) to the government to highlight the reasons we thought this decision would be detrimental for the public. We have also shared a [petition](#) set up alongside this, asking the government to revisit the decision. We have also started attending the Local Healthwatch national response meetings, which allow senior leaders from across the network to share information, and collaborate together in their work to connect with national stakeholders, whilst maintaining focus on safeguarding independent public voice. Linked to this, the Healthwatch National Response Working Group meetings, focus on thinking and actions around future independent patient voice models, and impact.

Along with many other local Healthwatch, we have been starting conversations about the possibility of developing a local model for independent voice; at the [September meeting of the Health and Wellbeing Board](#) we asked members of the board to consider the local response. There was broad agreement that the loss of independent voice was unwelcome and significant, and we heard a commitment to explore further a locally developed model.

We will continue to advocate for the importance of involving people in decision making, wherever those decisions are made.

11. Supporting services to involve people

Care Quality Commission (CQC) inspection of Adult Social Care: As part of this inspection, we provided support by doing a de-brief session for focus group participants. The group consisted of unpaid carers, and people who use social care;

we spoke with them about their experience of the inspection, capturing additional points that they felt they had not had the opportunity to share with the CQC team and the local authority. This will enable the local authority to respond to any concerns promptly, while awaiting the inspection report.

The Corner: We attended a team meeting at The Corner, to inform staff about how we can help their service users' and families, and hear about some of the health and social care issues they come across in their work.

12. Volunteers and Placements

Last quarter we made the decision to pause actively recruiting new volunteers due to the decisions being made about the future of Healthwatch. However, we still have a dedicated team of existing volunteers who continue to support all aspects of our work. We are also working with the New Beginnings team to draw on additional volunteer capacity for some projects.

This quarter, our volunteers gave up over **213 hours** of their time to support our work.

Volunteer highlights:

- Volunteers helped support our family fun day in Richmond Park estate – helping with face painting, refreshments, hook-a-duck and more. They had also helped to shape this event – helping us carry out consultation with local people and stakeholders about what was needed in the area, and advertising the day. (See section 6 for more on this event)
- A volunteer has been analysing the local data we collected for the Healthwatch England report: [What trans and non-binary people told us about GP care](#). We will revisit local partners who supported us with the surveys to update them on the findings
- New members of our Strategic Advisory Group have started to take an active role in our work – over the summer they took part in workshops with staff to help them gain more insight into Healthwatch work, to help them in their role.



13. Healthwatch Team

There have been no changes to our Healthwatch staff team this quarter, but we have shared news of upcoming changes:

- Husam Hasan will leave his Community Outreach role at the start of October, as his fixed term contract comes to an end.
- Sarah Fowler will be returning to the team as Community Outreach Lead, following her secondment to another project in VAS.
- Our Chief Officer, Lucy Davies, will be leaving her role at the end of October as she moves on to an opportunity in another organisation.

Mark Gamsu has been appointed Interim Chair of our Strategic Advisory Group, following the loss of our long serving Chair, Judy Robinson who passed away in May.

14. Coming up next

Working with our Speak Up Grant recipients to help their work have impact

Working with groups in Wybourn to design local health and social care information and wellbeing sessions

Delivering a series of breakfast information sessions for the public in Richmond Park Estate

Hosting medical students on placement who will do a mini-project looking at young people's views on cosmetic treatments, self-image and the influence of social media

Using Voice for Influence



As well as sharing our intelligence in our written round ups, staff and volunteers regularly raise feedback and share experiences in the meetings they attend. Taking part in meetings helps us stay informed about developments in services, and enables us to promote the importance of listening to, and involving people, in shaping those developments. This quarter, we have attended the following meetings, boards and committees:

- Sheffield Health and Wellbeing Board
- Lived Experience and Co-production Assurance Group (Sheffield Health and Social Care Trust)
- Integrated Care Board (NHS South Yorkshire)
- Quality, Patient Involvement and Experience Committee (NHS South Yorkshire)
- Health Scrutiny Sub-Committee – Sheffield City Council
- Area Prescribing Group
- Primary Care Commissioning
- Integrated Medicines' Optimisation Committee (IMOC)
- Sheffield Health and Care Partnership Board
- South Yorkshire Local Dental Network
- Housing, Health and Wellbeing Executive group
- Sheffield Teaching Hospitals Quality Objective Steering Group
- STH Patient Experience and Engagement Group
- Patient Engagement and Experience Committee – Sheffield Teaching Hospitals
- Adult Partnerships Board
- Older Adults Transformation Project Board (Mental Health)
- Sexual Health Network
- Sheffield Children's Hospital Care Experience & Engagement Group

Representatives from other Healthwatch in South Yorkshire also attend a range of meetings on behalf of our region, giving us an opportunity to feed into other areas of work including:

- South Yorkshire Integrated Care Partnership
- South Yorkshire Mental Health/Crisis care meetings
- South Yorkshire System Quality Group