

Quarterly Report

October–December 2025

Heard from 697 people about their views and experiences of health and care



Worked with Local Healthwatch colleagues to plan the network's response to plans to abolish Local Healthwatch.



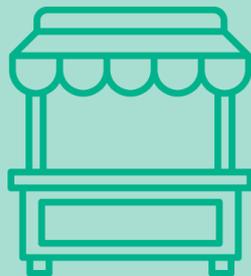
Helped 181 people with enquiries about health and social care services



Held 4 **Health and Wellbeing breakfast mornings** in Richmond Park Estate, in partnership with Great Places Housing Group



Opened up our regular public information drop-in to professionals from statutory and voluntary sector organisations



Contributed evidence to the Independent Commission on Adult Social Care, known as the Casey Commission



1. Introduction

As we look back at the end of 2025, we reflect on our impact and how we've helped to make a difference at different levels. We have helped people overcome barriers to accessing the care they need; for example we liaised with a provider to ensure digital barriers didn't prevent a patient from accessing their medication, and gave people the details of dentists taking on NHS patients when they needed one.

By working in partnership with Great Places Housing Group, we have made a positive impact in a community that we've been working in. The local Early Years team established a new support group for parents of young children in the local community centre on the Richmond Park Estate, after parents told us how much they would value it.

We have also helped local people's voices to be heard at a national level. We shared what people have told us about Adult Social Care in Sheffield with the Casey Commission. These insights will be included in the evidence which informs recommendations on the national reform of the adult social care system.

In the autumn, we took our information and advice service into the heart of the community, providing tailored information at our Health and Wellbeing Breakfast mornings at the Richmond Park Estate community centre. We also opened up our regular public information drop-in in the city centre to professionals from statutory and voluntary sector organisations – to help them better support their service users.

As 2026 begins our future remains uncertain due to government plans to close Local Healthwatch down and 'lift and shift' our statutory functions over to Integrated Care Boards and local authorities. If this plan is realised, it will be the first time there has not been a statutory independent voice organisation in England in over 50 years.

We remain greatly concerned by the potential loss of local independent voice, and have been working with our Healthwatch colleagues across the country to try to influence the future legislation. Locally, we have been advancing discussions with key stakeholders about the possibility of Sheffield retaining an independent voice model. We've also spoken with MPs, highlighting some of people's concerns around the proposed changes, such as services 'marking their own homework', and 'the less well heard' becoming 'the unheard' in the new arrangements.

We would like to thank everyone for their support over the last few months; for joining us in the fight to retain independent voice, and create a future where all people and communities have the chance to shape and improve health and care services in Sheffield.

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 provide 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.

181 contacts

with our information and advice officer

621

visitors to our website looked at the information pages

24%

of visitors to our website looked at information articles

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

We heard about challenges in **accessing care following hospital discharge**. The Reablement Service, delivered through the Short-Term Intervention Team (STIT), provides up to six weeks of support to help people regain independence after leaving hospital. Some patients said they weren't eligible for the service despite feeling that they required support. Others who were eligible, reported delays in receiving care once they returned home.

Concerns were raised **relating to wider determinants of health**, including the amount of litter visible across Sheffield's neighborhoods. People said they would like to see more action being taken to address the issue, as it was impacting wellbeing and negatively affecting communities. Housing-related concerns were also shared, such as people experiencing delays to social housing repairs and long waiting times for priority rehousing. In addition, some people reported feeling unsupported when experiencing homelessness.

We received mixed feedback relating to **breastfeeding support** available in Sheffield. Some people praised their midwives and the Family Hub Peer Support Workers, whilst others found their advice could sometimes be limited or inconsistent.

Where have we signposted people this quarter?



Case study

Barriers to accessing medication

Maria* contacted us as she hadn't been able to access her medication and was feeling very worried. She explained that her prescriptions had previously been delivered to her home without the need to reorder. However, a recent letter she received stated that she would now need to order her prescriptions online as and when she needed them.

Maria explained that she struggled using online systems. She had tried calling her GP practice, but a recorded message stated repeat prescription requests could not be taken over the phone.

Maria asked us for help, so we contacted the surgery. They contacted Maria to confirm that she could order her medication by phone and issued a repeat prescription for her. They also offered Maria support if she wanted to start using the online system.

*Name has been changed

Impact

We raised feedback from people with long term health conditions, who felt their concerns weren't being fully acknowledged when presenting at A&E. Sheffield Teaching Hospitals told us they are setting up a task and finish group to drive improvements on this topic and invited patient representation.



We also raised concerns from people who've been experiencing issues getting continence supplies delivered and didn't know how to follow this up. The South Yorkshire Integrated Care Board liaised with all the current delivery services and produced advice for patients on what they could do if they experience difficulties.

3. Website

Website views:



This quarter we had **2,588 visitors** to our website, totalling **5,244 page views**.

Most popular pages:



[Advertising our breakfast information sessions in Richmond Park Estate;](#)

[What have we been hearing in August-September?](#)

Info articles with the most views:



[What is social prescribing?;](#)

[What can Pharmacy First do for me?;](#)

[Referrals and your right to choose](#)

We shared some **news articles** this quarter to help people stay up to date on local and national changes. These include national changes in primary care – the [new GP charter](#) and [Jess's Rule](#), as well as local updates – [SHSC changing its name](#) and key findings from Sheffield in the [inpatient survey results](#).

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)



This quarter nearly all of these organisations have finished their outreach activities. Activities have included workshops, information sessions, campfires, surveys, and more.

We are now in the process of supporting the groups to finish writing their reports and make recommendations to services based on their findings. We will begin publishing these findings in the next quarter.

5. Community Partnerships

On 5 November we held a special edition of our regular public information drop-in. We opened it up to professionals from statutory and voluntary sector organisations. We were visited by Age UK, Likewise, Yes2Ventures and Citizenship First. They came to the hub to find out more about our information and advice service and how it can help their service users. They spoke with our Information and Advice Officer who discussed the health, social care and wellbeing information needs of the people they support, and shared relevant resources to help address those needs.

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, provide information and advice, and highlight the impact of sharing feedback with us.

Likewise

In October, we attended a Black History Month event hosted by Likewise, an organisation supporting individuals with drug and alcohol addiction. The event's theme, "Reclaiming Narratives," highlighted the rich, diverse cultures and experiences of the global majority.

The day provided valuable insights into the inequalities and challenges people in addiction recovery face, including difficulties accessing health and social care services.

We shared health and social care support information with individuals, and the event enhanced our understanding of the relationship between cultural narratives and recovery, and highlighted the importance of inclusive support networks.



S2 Food bank

In December, we visited the S2 Food Bank which supports people facing financial hardship in the in the S1, S2, and S12 areas of the city.

We spoke with people using the food bank, including individuals experiencing mental health challenges and homelessness. We learnt that some people who used to go to their GP practice to make an appointment were being told they had to book online



instead, and some people felt mental health services weren't meeting their needs and had experienced long waits for assessments.

In addition to collecting feedback, we offered information and advice about support options and accessing services, to help people navigate the health and social care system.

City of sanctuary

In December we visited the City of Sanctuary, an organisation that supports refugees and asylum seekers, as well as the Victoria Hall drop-in, a multi-agency information and advice hub in Sheffield for people seeking sanctuary.

During these visits, we spoke with people about their experiences of health and social care services and using the NHS App. We also provided information and advice on accessing services, to help address some of the barriers that people face.

At City of Sanctuary, we heard praise for maternity services, including the Jessop Wing, community midwives and health visitors, whilst Mulberry Practice patients reported that the service was good overall, and that they were able to access interpreters when they needed to.

At the Victoria Hall drop-in we were told that there were long waits following hospital referrals, but a patient who had surgery at the Royal Hallamshire Hospital said they had experienced great care and good communication throughout their experience.

Emerging Leaders launch event

In October, we attended the launch of the Emerging Leaders Programme, an initiative designed to support leaders from Global Majority communities in driving change and addressing inequality across the city.



We raised awareness of Healthwatch Sheffield, and gathered feedback on experiences of health and social care services, whilst connecting with leaders and organisations from a wide range of backgrounds.

Health and care information project: Richmond Park Estate

Every Thursday morning in November, we put on free health and wellbeing breakfast sessions at the Richmond Park and Birklands Residents Community Centre; offering free breakfasts, wellbeing activities, and information around different topics that local people had identified as important to them.

Each week we covered a different topic. The topics were mental health and wellbeing, health costs and the cost of living, local services and activities, and support for specific health conditions and carers.

People were able to get personalised information and advice about services from our Information and Advice Officer, and representatives from local organisations such as Woodhouse and District Community Forum, and the Family Hubs.

People enjoyed the arts and crafts activities, and Space to Breathe facilitated a guided breathing exercise at the mental health session. We also provided toys to make it a better environment for parents with young children. The group grew over time, with some people attending regularly.

Impact

“Healthwatch Sheffield’s work in Richmond Park this year has been invaluable, both in engaging residents and in assisting with revitalising of the area’s wider development plans. From their work residents have received the bespoke health support they require and the groundwork has been laid for future vital projects in the area. A new support group for parents of young children, which starts this month and will run fortnightly in Richmond Park, is a prime example of this.”



Felix Dyer

Community Partnership manager, Great Places Housing Group

Health and care information project: Wybourn

Between September and December, we carried out the listening phase of our health and care information project in Wybourn. We asked people about their experiences of health and social care, what information and advice would be useful, and what activities they would like to do locally. They also told us what they would like to see at our upcoming information events at the local community centre, and we gave them personalised information and advice.

We heard from over 70 people at a variety of community groups in the area, such as the Chatty Café, Golden Oldies, creative arts and crafts group, toddler groups, SAVTE English Conversation group, health visitors group, and baby groups.



People told us they would like information on a variety of topics including mental health, SEND support, healthy eating weight management, and smoking cessation.

Some people wanted health checks and to take part in local health-related activities such as healthy cooking and fitness activities.

In response to this feedback, we are designing health and wellbeing information and advice sessions that we will take place before the spring.

Impact

In November, we collaborated with **SAVTE** (Sheffield Association for the Voluntary Teaching of English) when we visited their **English Conversation group** at the Pat Midgley Community Hub, to find out about the group's experiences of health and social care services.



Members of the group needed English language support, so the conversation group tutors clarified unfamiliar terms and explained our questions. This enabled meaningful participation whilst supporting English language development.

Most people did not have a dentist, with many reporting difficulties finding one that would accept new NHS patients.

In response, we returned to the group with information on local NHS dental provision, including the Sheffield Community and Special Care Dentistry and the relevant eligibility criteria. As a result of our work, SAVTE arranged for medical students to attend the group to support the students to access dental care. This demonstrates the impact of responsive community engagement and partnership working in addressing barriers to essential health services.

7. Reports

What have we been hearing?

We've published two of our regular intelligence briefings this quarter:

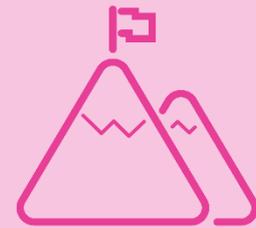
- [August – September 2025](#)
- [October – November 2025](#)

We continue to raise issues directly with service providers in a timely way through these briefings. This includes topics we hear about regularly (like NHS dentistry and difficulties getting a GP appointment), as well as emerging topics like winter vaccine eligibility, breastfeeding support, and accessible exercise options for disabled people.

Impact

Palliative and End of Life Care

Our report '[People's experiences of palliative and end of life care](#)' (January 2024) was included in Healthwatch England's evidence submission to the Health and Social Care Committee's Independent Expert Panel Palliative Care Inquiry. We also participated in an inquiry roundtable discussion, alongside a local person with lived experience.



This quarter, the Independent Expert Panel's report '[Expert panel: evaluation of palliative care in England](#).' was published. It will inform the Government's discussions about the future of palliative and end of life care in England. Our work helped to build a picture of the current state of Palliative and end of life care, and this has helped to influence thinking nationally, adding to the impact our work has already had in [Sheffield and South Yorkshire](#).

We would like to once again thank everyone who contributed to our work by sharing experiences of care with us, and helping us better understand what changes would make a positive difference to people in the future.

8. Quality Accounts

Sheffield Teaching Hospitals ask us to suggest topics for their Quality Objectives based on what we've been hearing from patients and the public over the last year. In December we suggested some key themes that have arisen from feedback; decisions on the Quality Objectives will be made in the new year.

9. Health & Care Public Forum (Sheffield)



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

At the meeting, the Forum reviewed a leaflet produced by Sheffield Teaching Hospitals, called "Help and advice for people who have been bereaved". The forum members highlighted what they thought worked well, and suggested improvements such as additional information that could be included. Their feedback was gratefully received by the hospital representatives who attended the group.

We also shared updates in relation to our work and the proposed abolition of local Healthwatch, and shared information about local and national involvement opportunities.

10. Local decision making and the Healthwatch role

In the summer, 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. The law needs to be changed for Local Healthwatch to be abolished; it is therefore unlikely to happen before 2027, with the confirmation of our funding for the next financial year (2026/27) reflecting this potential timeline.

This quarter, as developments have continued to unfold locally and nationally, we have continued to stress the importance of maintaining a local independent voice model which will support and challenge the local health and care system to work better for people in Sheffield.

The national [petition](#), asking the government to review the decision to remove independent patient and public voice from the future arrangements reached 10,000 signatures in November. This triggered a [response from the government](#), which reiterated the findings of the Dash report and the plan around how local Healthwatch functions will be delivered in the future.

However, through the Local Healthwatch National Response Working Group, we have continued to work with colleagues across the country to plan a coordinated response to influencing the future legislation around patient voice, and the future delivery of the Local Healthwatch functions. The group has also produced resources to support the network to challenge the proposed plans.

Locally, the Interim Chair of our Strategic Advisory Group has met with MPs and we have continued to have conversations with key stakeholders about the importance of retaining independent voice in Sheffield, and adopting a model which means people who are less well heard within the local health and care system will continue to be reached and listened to.

Following a discussion at the [September meeting of the Health and Wellbeing Board](#) about the possibility of developing a local model for independent voice, members of the Board have arranged to meet in January 2026 to consolidate their position around supporting the development of an independent model in Sheffield, ahead of the next Health and Wellbeing Board meeting in March.

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

In November 2024 we made a referral to the Health Scrutiny Sub-Committee in relation to **Continuing Healthcare (CHC)**. We highlighted concerns around consistently hearing negative feedback on accessing and receiving CHC and the associated processes, and pointed to the absence of a plan to explore people's experiences and use them to shape improvements. The sub-committee discussed the paper and agreed to form a plan to hear more from people with lived experience. In December 2025, we met with members of Sheffield City Council, South Yorkshire Integrated Care Board and Sheffield Advocacy Hub to start discussing the best course of action. A follow up meeting will take place in March 2026, where we will be joined by elected members of the sub-committee.

The **Casey Commission** is an Independent Commission on Adult Social Care, which will recommend how to reform the adult social care system in England. In October, we met with representatives from the University of Sheffield's Centre of Care to discuss possible approaches to hearing from people with lived experience at the event they were planning for the Casey Commission visit to Sheffield in November. We also suggested priority areas for consideration and recommended organisations to invite.

We participated in the event, and submitted further evidence after the visit to ensure the views and experiences of local people were included in the evidence base which will be considered when making recommendations for the future.

12. Volunteers and Placements

This quarter our volunteers supported our work in a wide range of ways, giving up **over 110 hours** of their time. Volunteers guide our work as part of our Strategic Advisory Group, provide patient and public views on health and care developments as part of the Health & Care Public Forum, and represent us at boards and committees across the city. They also help with our outreach work in communities, and analysing some of the things people tell us.

Volunteer highlights:

In December we hosted a Volunteer Winter Celebration alongside other teams in VAS (Voluntary Action Sheffield). Our volunteers joined those from the Volunteer Centre and New Beginnings for food, games and quizzes.



Medical student placement

In December we were joined by 3 third-year medical students from the University of Sheffield. Ayman, Mustafah and Polly worked on a project exploring young people's views on cosmetic procedures and beauty 'quick fixes' like botox, fillers, and weight loss jabs. This is a topic that's been in the news a lot lately due to conversations about safety and regulation. They explored the factors that influence young people to consider these procedures, and how confident people would be in identifying a safe practitioner to visit.

The students also helped with some of our other outreach work, visiting a baby group, and toddler group, and an information drop-in for asylum seekers.



13. Healthwatch Team

There have been some changes to the Healthwatch staff team this quarter:

- Two longstanding members of our team moved on from our team this quarter. Chief Officer, Lucy Davies, left at the end of October to pursue a new role, and Sarah Fowler ended her Community Outreach role with us in November, having found another job supporting people in the community.
- In November, Holly Robson took on her new role as Operations Manager, and Laura Cook started as the Head of Healthwatch Sheffield.
- Mark Gamsu stepped into his role as Interim Chair of our Strategic Advisory Group, and chaired his first meeting in October.

14. Coming up next

We will start to publish reports from our latest round of Speak Up grants

Our report '*Tinsley: a neighbourhood view of health and social care*' will be published

Delivering 2 health information events for people of all ages at the Pat Midgley Hub in Wybourn.

We will recruit a new Community Outreach Lead in January

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)
- 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
- Sheffield Teaching Hospitals (STH) Quality Objective Steering Group
- STH Patient Experience and Engagement Group
- STH Patient Engagement and Experience Committee
- Adult Social Care Collaborative
- Older Adults Transformation Project Board (Mental Health)
- Sexual Health Network
- Sheffield Children's Hospital Care Experience & Engagement Group
- Learning Disability Partnership Board

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
- Integrated Care Board (NHS South Yorkshire)
- South Yorkshire Mental Health/Crisis care meetings
- South Yorkshire System Quality Group