



## Speaking up for better care

Healthwatch Middlesbrough annual report 2025/26

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**Acting Chief Executive**  
Chris McCann



“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 Chief Executive

2025/26 has been a year of listening, influencing and making a tangible difference for people across Middlesbrough. At a time when health and social care services continue to face significant pressures, Healthwatch Middlesbrough has remained committed to ensuring that local people's experiences are heard, understood and used to drive improvement.

Middlesbrough is a community with tremendous strengths, resilience and pride, but we also know that many residents continue to experience health inequalities, barriers to accessing care, and challenges linked to deprivation and social exclusion. This makes the independent voice of Healthwatch more important than ever. I am incredibly proud of how the team have worked throughout the year to reach people where they are, in communities, neighbourhoods, community hubs, care homes, libraries, health settings and public spaces, ensuring that those whose voices may otherwise go unheard have an opportunity to influence change.

Some of the most powerful examples of our impact come from listening to those who face the greatest barriers. Whether Healthwatch were supporting with the Learning Disability and Autism Peer Review, embedding Winter Pathways or leading on engagement for future palliative and end of life care planning, Healthwatch Middlesbrough has demonstrated that meaningful change begins by listening to people's lived experiences.

Looking ahead, we recognise that Healthwatch nationally is entering a period of change and uncertainty. However, our focus remains clear. People in Middlesbrough need a trusted, independent organisation that can listen honestly, challenge constructively and ensure their experiences help shape better services. Whatever changes lie ahead, that commitment will remain at the heart of everything we do.

I would like to thank our Chair, Carole Marshall, our Advisory Board members, volunteers, Community Champions, partners and dedicated staff team for their passion, expertise and unwavering commitment throughout the year. Most importantly, I would like to thank every resident who has taken the time to share their story. Your voice is the driving force behind our work and the key to creating better health and care services for everyone in Middlesbrough.



**Chief Executive,**  
Carol Gaskarth



“As we move into the year ahead, we remain committed to championing the voices of local people, tackling inequalities, and ensuring that health and care services are shaped by the communities they serve.”

# A message from our Chair

Over the past year, health and social care services have continued to face significant pressure, and communities across Middlesbrough have experienced both the strengths and challenges within the system. This makes the role of Healthwatch more important than ever.

I am incredibly proud of how our Healthwatch Middlesbrough has responded. We have remained visible in our communities, listening to local people, particularly those whose voices are not always heard, and supporting more than 2,000 people to share their experiences or access information about their care.

By bringing these voices together, we have been able to highlight what is working well, where people face challenges, and where services could be improved. This insight has supported conversations with partners and helped shape how services respond to local need.

Our impact has been strengthened through collaboration with partners across the health and care system. By building trusted relationships and working together, we have ensured that people's experiences help shape services in meaningful ways.

However, we also recognise that we are entering a period of uncertainty, with changes ahead that may affect how independent patient voice is heard. It is essential that this independence is protected, as it underpins trust and ensures that people can speak openly about their experiences. However, we will stay focused and committed in the year ahead, championing the voices of our communities and ensuring they remain at the heart of decision-making.

I would like to thank our staff, volunteers and partners for their dedication and contribution.



**Chair, Carole Marshall**



“By listening to people and standing up for their voices, we can drive meaningful change in health and care.”

# About us

Healthwatch Middlesbrough is your local health and social care champion.

**We ensure that NHS leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you find reliable and trustworthy information and advice.**



## Our vision

To bring closer the day when everyone gets the care they need.



## Our mission

To make sure that people's experiences help make health and care better.



## Our values are:

**Equity:** We're compassionate and inclusive. We build strong connections and empower the communities we serve.

**Collaboration:** We build internal and external relationships. We communicate clearly and work with partners to amplify our influence.

**Impact:** We're ambitious about creating change for people and communities. We're accountable to those we serve and hold others to account.

**Independence:** Our agenda is driven by the public. We're a purposeful, critical friend to decision-makers.

**Truth:** We work with integrity and honesty, and we speak truth to power.

# Our year in numbers

In 2025/2026 we supported more than 1,728 people to have their say and get information about their care. We employed 2.05 staff and, our work was supported by 11 volunteers and 41 Community Champions.



## Reaching out:

**1,390** people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

**338** people came to us for clear advice and information on topics such as accessing NHS dental care and women's health.



## Championing your voice:

We published **3** reports highlighting our work across key areas, including care homes, hospital discharge, people's experiences of accessing GP services, using the NHS App and navigating Pharmacy First.

Our most widely read report, Living Well in Care Homes, focused on understanding what makes a care home a positive and supportive place to live.



## Statutory funding:

We're funded by Middlesbrough Council. In 2025/26 we received £92,500 which is the same as last year.

## Our digital reach

This year, we have significantly expanded our reach across all social media platforms and enhanced our digital presence. We also introduced a new “Our Work in Action” section on our website, making it easier for people to see the breadth and impact of our work.

### Reaching out through our website:



Between 1 April 2025 and 31 March 2026 we recorded **15,534** page views with **6,512** active users. Our most visited pages were the **Homepage, News & Reports and Events**.

### Social media:



#### Facebook

**Views: 93,786** – the number of times our posts were seen.

**Account Reach: 48,331**

Our social media channels help us share important health and wellbeing information while highlighting the impact of our work. We regularly promote national and local campaigns, raise awareness of key issues, and provide timely updates to help people stay informed and connected.

### E-bulletin:



During this reporting period, we distributed a total of **12 e-bulletins**. These bulletins served as a key communication tool, sharing updates on **local events**, highlighting **relevant national news**, and providing insights into the **ongoing work and achievements of our team**.

# A year of making a difference

Over the year we've been out and about in the community listening to your stories, engaging with partners and working to improve care in Middlesbrough. Here are a few highlights.

## Spring

Raised awareness during Dementia Action Week by hosting stalls in supermarkets and shopping centres, reaching wider audiences and sharing vital information with people who may not otherwise access support.



Participated in an LD and Autism peer review, strengthening partnerships and collaboration with VCFSE organisations to better address local needs and improve community support.



## Summer

Produced local podcasts highlighting key community issues, sharing real experiences, raising awareness of health inequalities, and amplifying voices to showcase challenges and improvements across South Tees..



Provided feedback on University Hospitals Tees' EDI Annual Report, strengthening focus on tackling inequalities and ensuring commitments reflect diverse community and workforce needs.



## Autumn

Hosted a workshop with adults with learning disabilities, capturing lived experiences, identifying what works well, and shaping ideas to improve wellbeing, independence, and support.



Supported development of a local mental health resource by sharing community insight, influencing clearer information, and working in partnership to improve understanding and access to support.



## Winter

Our team completed cancer and diabetes awareness training, enhancing community engagement, encouraging early detection, and supporting people with practical advice to improve health outcomes and wellbeing.



Contributed to the University Hospitals Tees' Experience of Care Council, sharing insights to influence improvements and strengthen patient voice.



# Working together for change

## 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."**



## 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.thinkbeforeyoufirst.health](http://www.thinkbeforeyoufirst.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."



# 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.



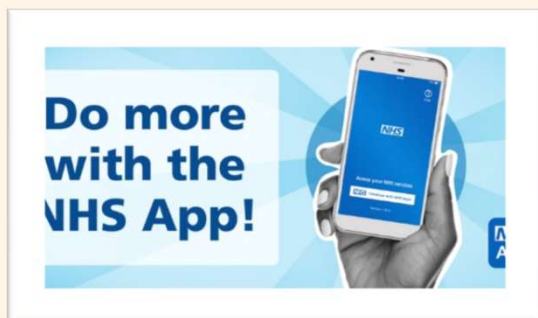
**“Talking about end of life isn’t easy, you need time and people you trust.”**

**“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

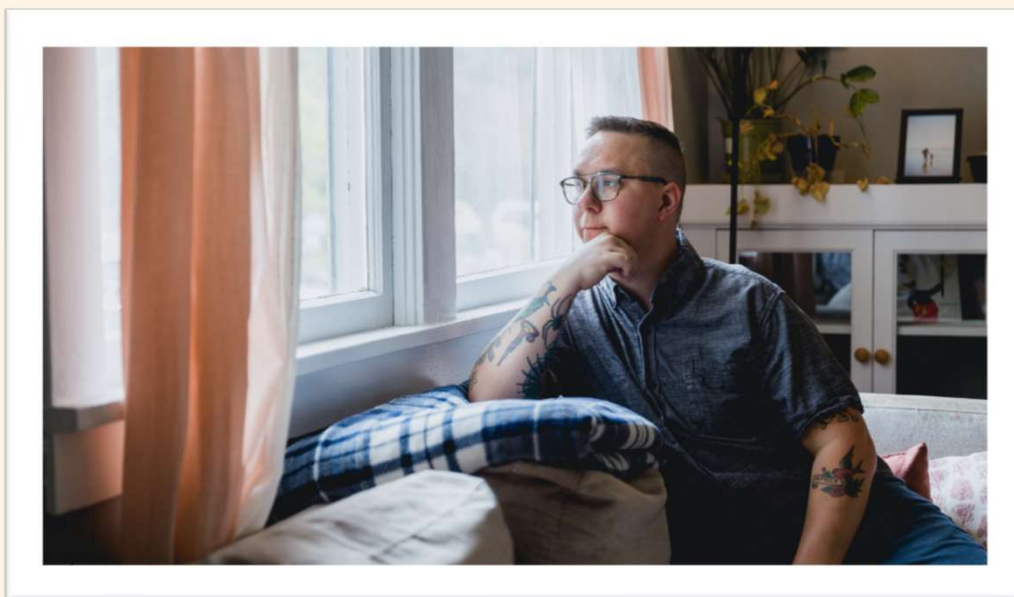
## Mental health rehabilitation: what helps people recover – and what puts them at risk

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.



'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 Middlesbrough this year:



## Creating empathy by bringing experiences to life

**Hearing personal experiences and their impact on people's lives helps services better understand the issues people face.**

After hearing from wheelchair users and carers about challenges with toilet facilities at James Cook University Hospital, we shared their experiences with the trust. As a result, clearer signage now directs people to a larger complex needs toilet. This simple change has increased use, improved awareness, and enabled more dignified, supportive experiences for patients requiring additional assistance—showing how listening to lived experience can lead to meaningful improvements.



## Getting services to involve the public

**By involving local people, services help improve care for everyone.**

Middlesbrough Council approached Healthwatch to support the development of a lived experience board for adult social care. We led a successful bid, securing a two-year contract to ensure local people play a central role in shaping services. While delivery is carried out by our host organisation, PCP, the work is guided and managed by Healthwatch - demonstrating our key role in influencing how services listen and respond to the voices of the community.



## Improving care over time

**Supporting people to access tools and information helps them take greater control of their health and care.**

We have championed the use of the NHS App, acting as informal ambassadors within the community. Through engagement activities, events, and social media, we have promoted its benefits, demonstrated how it works, and supported people to use it confidently. By helping individuals access services, manage appointments, and view health information, we are improving digital inclusion and enabling people to take a more active role in their care over time.

# Listening to your experiences

Services can't improve if they don't know what's wrong. Your experiences shine a light on issues that may otherwise go unnoticed.

This year, we've listened to feedback from all areas of our community. People's experiences of care help us know what's working and what isn't, so we can give feedback on services and help them improve.



# Listening to experiences of care home residents

**Last year, we listened to residents, families, and staff across 11 care homes to understand what helps people live well.**

These conversations highlighted the importance of compassionate care, meaningful activities and feeling at home, while also identifying where improvements are needed to support quality of life.

## What did we do

Between April and June 2025, we visited 11 care homes across South Tees. We spoke directly with residents, families, and staff, observed daily life and took part in activities to understand experiences first-hand. By building relationships and engaging in natural conversations, we gained valuable insight into what makes a positive care home experience and where challenges remain..

## Key things we heard:

- A homely environment and feeling of belonging are key to wellbeing
- Kind, compassionate staff make a significant difference to daily life
- Social interaction and friendships help reduce isolation
- Activities support mental health, creativity, and engagement
- Being involved in everyday tasks and decisions helps residents feel valued and independent
- Experiences can vary, with some residents reporting limited choice or awareness of activities
- Staff highlighted time, staffing, and resource pressures as challenges to consistent delivery

This work highlighted the importance of prioritising quality of life alongside care, while also identifying opportunities to strengthen consistency and ensure all residents benefit equally from positive experiences.

## What difference did this make?

This work has helped build a clearer picture of what good care looks like and where improvements are needed. By sharing these insights with providers and partners, we are supporting the spread of good practice and encouraging changes that improve quality of life. Most importantly, it ensures that the voices of residents and those who support them are heard and used to shape more inclusive, person-centred care across South Tees.

# Shaping safer hospital discharge processes

**Last year, we worked with care providers across South Tees to understand the challenges of hospital discharge and how it can be improved.**

Their experiences highlighted gaps in communication, coordination and planning that can impact safety and continuity of care when people leave hospital.

## What did we do

We gathered detailed feedback from care providers across Middlesbrough and Redcar and Cleveland, capturing real experiences of discharge processes, including communication, medication, transport and coordination between services.

## Key things we heard:

- Poor communication and incomplete information when people are discharged
- Discharge decisions do not always reflect real care needs or setting capabilities
- Medication and equipment issues, including delays or missing information
- Hospital passports and care plans are often not used, affecting continuity
- Examples of unsafe discharges, including people returning home without support
- Transport and access issues, with people arriving home without keys or assistance
- Staff face emotional and operational pressures managing complex needs
- A lack of joined-up systems and communication between services

This work highlighted the need for more joined-up, consistent discharge processes that better recognise care providers as key partners in ensuring safe transitions from hospital.

## What difference did this make?

This work highlighted the need for more coordinated, consistent discharge processes and stronger partnership working with care providers. Our findings informed clear recommendations and the Trust has already begun making improvements, including new discharge checklists, better medication communication and steps towards more joined-up working to support safer, smoother transitions from hospital..

# Recognising excellence through Spotlight Awards

**Listening to experiences also means recognising when things are working well.**

Our Spotlight Awards celebrate individuals, teams and organisations across South Tees who make a positive difference in health, social care, and the wider community.

## Our Spotlights:

Since launching in May 2025, we have received 15 nominations highlighting a wide range of contributions – from primary care staff and specialist hospital teams, to community organisations, volunteers, and grassroots groups supporting people with learning disabilities, homelessness, addiction, dementia, and the Deaf community.

Each award recognises those who go above and beyond – from improving access to healthcare and empowering individuals, to creating safe, inclusive spaces and delivering compassionate, person-centred support.



**We would like to thank everyone who submitted nominations. Your contributions help shine a light on outstanding practice, celebrate dedication and innovation, and ensure that the difference being made across our communities is recognised and shared.**

# Hearing from all communities

We're here for all residents of Middlesbrough. That's why, over the past year, we've worked hard to reach out to those communities whose voices may go unheard.

Every member of the community should have the chance to share their story and play a part in shaping services to meet their needs.

## This year, we have reached different communities by:

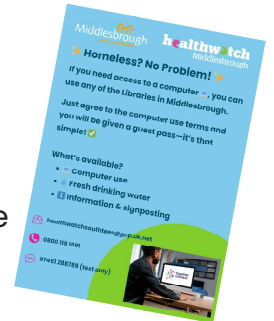
- **Reaching communities that may go unheard:** Engaging with people who are rough sleeping or without a fixed address, helping them share experiences and highlight barriers, including digital access.
- **Reaching people experiencing socio-economic deprivation:** Delivering health and wellbeing events in areas of high deprivation, improving access to support and opportunities to share feedback.
- **Supporting those facing multiple barriers:** -Running a health drop-in in a women's refuge, providing a safe space for people experiencing multiple challenges to access services and be heard.



# Breaking down digital barriers for homeless communities

**Through engagement with people who are rough sleeping or without a fixed address, we identified significant barriers to accessing digital services.**

Many shared difficulties booking or attending healthcare appointments due to limited internet access or phone credit. We also found low awareness that you do not need a fixed address to access free online services in local libraries, including among frontline staff. In response, we developed an accessible leaflet to promote this support and improve signposting.



## What difference did this make?

This work has improved awareness of free digital support available in local libraries, including the fact that people can access online services without needing a fixed address. By creating and sharing targeted, accessible information, we are helping remove barriers to essential services such as healthcare, housing and benefits. Strengthening links with partner organisations has ensured more consistent signposting, enabling vulnerable individuals to access the tools they need to stay connected and better manage their health and wellbeing.

## Bringing health support into safe spaces

**We worked with partners to deliver a health drop-in session within a women's refuge, making it easier for residents to access support in a safe and familiar environment.**

The session offered healthy heart checks, diabetes awareness, sexual health advice, and oral hygiene support. Half of residents attended, sharing that traditional services often feel inaccessible due to stigma, safety concerns, and anxiety about being seen or encountering people linked to past trauma.

## What difference did this make?

This work showed the value of taking services directly into safe, trusted spaces. By removing barriers such as fear, stigma, and access challenges, women felt more comfortable having open conversations about their health. Some accessed support they would not have sought elsewhere. The session strengthened partnership working and highlighted clear opportunities to expand outreach, including mental health and substance misuse support. It reinforced the need for flexible, person-centred approaches that respond to people's circumstances, ensuring services are accessible, safe and shaped around what individuals say they need.

# 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 338 people have reached out to us for advice, support or help finding services. 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



Healthwatch Middlesbrough- Annual report 2025-2026

# Bringing Support Closer to the Community

**To support local communities, we continued delivering a programme of Health and Wellbeing events across Redcar, Hemlington and Grangetown, helping residents access information and services that support their health and wellbeing..**

Residents had the opportunity to engage directly with professionals, receive tailored advice and connect with a wide range of services covering mental health, physical activity, smoking cessation, diabetes, domestic abuse, housing and training opportunities. By bringing services together in community settings, these events made it easier for people to find the right support while also giving us valuable insight into the barriers they face in accessing health, care, and wider support services..



“

“Feedback from my team was that it was a great event that seemed to have a lot of interest.”

“Fabulous event.”

## Access to urgent medication for a vulnerable resident

**Thanks to Healthwatch involvement, a care home resident was able to access essential medication and be safely registered with a GP.**

A care home contacted us when a resident with a learning disability had been left without medication due to delays in registering with a new GP. Staff were unsure how to resolve the issue and were concerned about the risks. We contacted the GP and highlighted alternative routes, including emergency prescriptions through NHS 111. As a result, the resident was successfully registered and the care home was able to access the medication needed

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## Supporting safe access to prescriptions

**Thanks to Healthwatch support, a patient with additional needs received guidance to reduce risks when accessing prescriptions.**

A person with mobility issues told us they struggled to collect prescriptions due to long waits and being unable to stand for extended periods. This was having a significant impact on their health. We provided information on pharmacy standards, reasonable adjustments, and options such as home delivery, helping the patient understand their rights and access safer support.

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## Enabling access to sexual health support services

**We provided sensitive, appropriate signposting to sexual health services, helping an individual access timely and appropriate care..**

During community engagement, an individual expressed uncertainty about accessing emergency contraception but felt unable to fully explain their situation to their GP. Recognising the sensitivity, we provided clear, confidential information and signposted them directly to the local sexual health clinic. The individual confirmed they would attend. This intervention helped overcome cultural and communication barriers, enabling timely access to care and highlighting the importance of accessible, community-based information.

# Showcasing volunteer impact

Our fantastic volunteers have given 432 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:

- Supported a wide range of activities helping us connect with diverse communities
- Helped gather feedback, promote services and tools, and support health initiatives such as blood pressure checks and community consultations.
- Board members provided strategic oversight, attended key meetings, and supported reports and joint responses to improve local services.



# At the heart of what we do

This year, we were proud to recognise two outstanding individuals through our Spotlight Awards, celebrating the difference they have made to Healthwatch and the wider community.



Ian

Ian Holtby was awarded our first Spotlight Award in recognition of his lifetime dedication to health and care.

A long-standing volunteer and board member, Ian has continued to give his time and expertise after retirement, supporting consultations, representing Healthwatch, and helping to shape local services.

His commitment, reliability and strong belief in high-quality care for all have made a lasting impact, and this award recognises his exceptional contribution.

Anthony was recognised with a Spotlight Award for his outstanding contribution as a volunteer.

Over the past two years, he has become a valued member of the team, known for his positivity, kindness and willingness to help.

Whether supporting community events or engaging with the public, Anthony brings a friendly and approachable presence. His dedication and enthusiasm embody the spirit of volunteering, and this award celebrates the difference he makes to both our team and the wider community.



Anthony

## Be part of the change.

If you've felt inspired by these stories, contact us today and find out how you can be part of the change.



[www.healthwatchmiddlesbrough.co.uk](http://www.healthwatchmiddlesbrough.co.uk)



0800 118 1691



[healthwatchesouthtees@pcp.uk.net](mailto:healthwatchesouthtees@pcp.uk.net)

# Finance and future priorities

We receive funding from Middlesbrough 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	£92,500	Expenditure on pay	£78,137
Additional income	£4,650	Non-pay expenditure	£23,436
		Office and management fee	£5,930
<b>Total income</b>	<b>£97,150</b>	<b>Total Expenditure</b>	<b>£107,503</b>

## Additional income is broken down into:

### Integrated Care System (ICS) funding:

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

Purpose of ICS funding	Amount
ICS Core Network Funding	£4,000
PCARP Funding	£650

# Finance and future priorities

**Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.**

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

**Our top three priorities for the next year are:**

## **1. NHS App Awareness and Support**

To raise awareness of the NHS App, support people to use it confidently, and gather insight on barriers to digital access, ensuring local people are prepared for future NHS digital services, including NHS Online.

## **2. Awareness of Self Service for Universal Information and Advice**

To understand population awareness, confidence and use of self-service information and advice across health, care and wellbeing, and to identify barriers that may limit people's ability to support themselves, make informed choices, and access the right help at the right time.

## **3. Enhanced Engagement Programme**

Healthwatch will deliver an Enhanced Engagement Programme that uses practical health interventions—such as blood pressure checks and providing cancer and diabetes awareness information—to support meaningful conversations with local people.

This work will focus on engaging with seldom-heard communities and individuals who face multiple barriers to accessing health and care services. By going into communities and creating informal, supportive environments, we will gather deeper insight into people's experiences, understand the challenges they face, and identify where services need to improve.

# Statutory statements

The organisation holding the Healthwatch Middlesbrough contract is Pioneering Care Partnership (PCP).

Healthwatch Middlesbrough uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

## The way we work

### **Involvement of volunteers and lay people in our governance and decision-making.**

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

Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2025/26, the Board met **4** times and made decisions on matters such as transitioning from the Star Awards event to a more targeted 'Spotlight' approach to recognising impact and good practice and, strengthening our community engagement priorities to better reach underserved groups and address health inequalities.

## **Methods and systems used across the year to obtain people's experiences**

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services.

During 2025/26, we have been available by phone and email, provided a web form on our website and through social media, and attended meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website share on socials, include in our ebulletin and distribute to key stakeholders and community members.

# Statutory statements

## Responses to recommendations

We had zero providers who did not respond to requests for information or recommendations. 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.

In our local authority area, for example, we take information to The South Tees Live Well Board, South Tees Hospitals NHS Foundation Trust Council of Governors and the Integrated Care Board (ICB) Place committee. In addition to this, we also take insight and experiences to decision makers on a quarterly basis with local authority adult social, primary & secondary care, Care Quality Commission, Cleveland Local Medical Committee, Tees Esk and Wear Valley NHS Trust and relevant themed steering groups across South Tees.

We also take insight and experiences to decision-makers in the North East and North Cumbria (NENC) Integrated Care System (ICS). For example, we provide quarterly reports for the NENC ICB which is also considered at the Patient Voice committee, then after analysis and triangulation go to Quality & Safety Committee. The Quality & Safety committee then make recommendations direct to the ICB. Any reports re Primary Care also go to the Primary Care Strategy & Delivery committee.

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

## Healthwatch representatives

Healthwatch Middlesbrough is represented on the South Tees Health and Wellbeing Board by Linda Sergeant, Project Lead.

Healthwatch Middlesbrough is represented on the Integrated Care Partnerships in the South ICP area of NENC ICS by Natasha Douglas and Christopher Akers-Belcher, Healthwatch Regional ICB Coordinator.

The Regional ICP is attended by Christopher Akers-Belcher and the ICB Place Committee is attended by Linda Sergeant.



**Healthwatch Middlesbrough**  
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