



**Priorities 2025–2026**

# **Listening Survey Report**

Healthwatch Stoke-on-Trent

## About us

# Healthwatch Stoke-on-Trent 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.

# Listening Survey Results

Healthwatch Stoke-on-Trent asked people about their views on what they thought our work priorities should be for this coming year 2025 to 2026.

## People's voices:



The survey had a relatively low response rate of 47 respondents who shared their views of what priorities we ought to be considering for this coming year.

## People's location:



Of the 47 respondents, 9 of these were from North Staffordshire residents rather than Stoke-on-Trent but have been left in the responses as they are likely to also be accessing secondary care services in Stoke-on-Trent.

## Awareness of Healthwatch Stoke-on-Trent:



56% of people had heard of us. 42% thought our knowledge was good or excellent with 42% saying good or excellent in how we understood peoples issues.

46% thought the helpfulness of the information we provided was good or excellent. 76% Would recommend us to their friends, family, colleagues or peers.

# People's views on priorities

## What people told us via the survey and through their story sharing

### Mental health services

One of the main themes from the survey was around adult mental health services. It is recognised that there are different levels of need and service provision within mental health services.

Being able to access talking therapies through self-referral without the need for a GP appointment was appreciated.

However, for those with a higher level of need, access to services could be more problematic with access through the crisis team being seen as difficult and staff lacking in empathy and communication skills.



Also, waiting lists to access services were a theme

### Children & adolescent Mental Health Services

Access to CAMHS was a theme from the survey with waiting times being a source of frustration.

People also spoke about the process of children being assessed for autism and ADHD and feeling that the triage system was screening out children who did have a need.

This was echoed from the feedback received during the last 6 months with parents with children who are waiting for a diagnosis or have a confirmed diagnosis from a private provider experiencing barriers to accessing services from CAMHS.



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### GP Services

There were comments around the communication between primary and secondary care services with regard to referral delays and tests not being ordered due to uncertainty about who would fund them.

Feedback from the public over the last 6 months also showed that communication between professionals in different departments was a cause for concern.



# People's views on priorities

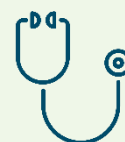
## What people told us via the survey and through their story sharing

### Access to primary care

Being able to access primary care services particularly appointments with a GP was a theme from the survey with a mixture of views with people feeling that they struggled to access face to face appointments.

However, there were also comments about the convenience of online and remote appointments for people who work or struggle to book appointments at 8am.

Primary care services were also a main theme from the feedback received by us over the last 6 months with access to appointments being the predominant concern but also concerns about being listened to by professionals.



### Hospital care

Feedback from the public raised a number of issues with hospital care but these were not specific to a particular service or specialty area. However, administration and cancellations were also overarching themes.



### d/Deaf community

From feedback obtained through outreach activities, communication from the NHS with d/Deaf people is a concern with a lack of appropriate communication and poor access to BSL interpreters.



### Adult autism

A lack of services and support from the NHS after a diagnosis of autism for ADHD was raised as a concern alongside being referred to charity-based support that did not receive any NHS based funding to provide that service.

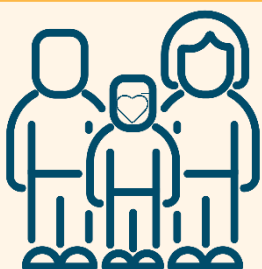




# Opportunities for change

**We've worked with local VCSE organisations like PEGiS and heard from people at the Community Lounges as well as a newer one for families of young people with the SEND. This increased community based working creates opportunities to work with people whose expert views can be a catalyst for change.**

## A collaborative approach to improve SEND service:



One of our biggest sources of feedback is around CAMHS and their delays/rejection rates of autism and ADHD assessments is coming up quite a lot.

We have started regular attendance at the local Parent and Carers of Children and Young People within SEND called PEGiS.

They have recently introduced a further range of sessions for parents/carers modelled around a community hub called the Stoke SEND Community Lounges.

As a result we are also being invited to Special Schools for their SEND parent's coffee afternoons. We also have planned in an introductory visit to Caudwell Children, a private provider which many parents are using.

These are currently hot issues for parents and carers of CYP with SEND.

We could arrange focus groups with parents to obtain stories of those stuck waiting, who have been rejected, and equally success stories. Identify with the NHS provider their criteria for an assessment with CAMHS, then compare this with private assessment services (since there are a number of people turning to them).

We can seek to produce in partnership with PEGiS information for people who are considering a private assessment the positives and negatives as there have been stories of people getting a diagnosis which is not accepted by the NHS.

We can equally use this to recommend to private providers ways they can ensure their assessments are used and also challenge the NHS providers why their pathways take so long

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## An exploration of adults MH/ADHD/Autism services:



Our largest source of feedback is around mental health services and the different levels of need and service provision within mental health services and of the routes peoples have to use to access services like Talking Therapies.

We have heard those with higher levels of need face problematic access to services through the crisis team who are described by some as lacking in empathy and communication skills.

We could arrange focus groups and a series of short surveys to better understand why there are challenges with accessing the crisis team.

We could supplement this with either Virtual Visits or in person Enter and View visits to Talking Therapies provision to gain on the day user feedback.

We can then evaluate what those barriers are and work with the provider to address opportunities for change including hosting a reference group of experts through experience and what can be done to change it.

Similarly, for adults ADHD/Autism support, there could be a mix of focus groups and surveys – we need to identify what support people have received, how they found that support, and what support people would like to have received.

We would also look at the waiting times people have experienced and what if any strategies they have used or if like children's they have used private services.

This will paint a clear picture of what support people are getting, if it works, and any existing gaps which we can use with providers and commissioner to see how these difficulties can be addressed.

# Proposed priorities

## The proposed priorities for Healthwatch Stoke-on-Trent 2025–2026

### Priority 1 – CYP SEND Services

To undertake a project to look at the issues we have heard within the SEND services for children and young people, working with existing voluntary support services to better understand the difficulties they face with long waits for assessment and service provision.

### Priority 2 – Adults MH/ADHD/Autism Services

To undertake a project to look at the issues we have heard within the adults MH/ADHD/Autism services to better understand what support people are getting, if it works, and any existing gaps which we can use with providers and commissioner to see how these difficulties can be addressed.

### Priority 3

To broaden our Community Outreach Programme to focus on wider range of community groups, especially those within our two focused priorities, but looking for those groups who are less well served by traditional services.

### Priority 4

To increase our volunteer numbers for people based in community settings who can support our intelligence gathering and information dissemination like surveys and general awareness of Healthwatch Stoke-on-Trent.

### Enter and View Programme

We will base our Enter and View Programme to support our main work priorities as well as places or services that intelligence shows are not performing as well they can. These plans will be shared with our Independent Strategic Advisory Board quarterly to approve the planned visits.



Commerce House,

Festival Park,

Stoke-on-Trent

ST1 5BE

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

t: 03303 130 247

e: [info@healthwatchstoke.co.uk](mailto:info@healthwatchstoke.co.uk)



@HealthwatchSoT



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The contract to provide the Healthwatch Telford and Wrekin service is held by Engaging Communities Solutions C.I.C.

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

t: 01785 887809

e: [contactus@weareecs.co.uk](mailto:contactus@weareecs.co.uk)

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