

Our role and functions

- **Healthwatch Shropshire** is the health and social care champion for the local population our function is to **understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf**
- Established by the **Health and Social Care Act 2012** to **drive patient involvement** and build on the functions of LINKs (Local Involvement Networks) in response to the **Frances Report into Mid Staffordshire NHS Foundation Trust** which states

‘local healthwatch is intended to be the local consumer voice with a key role in influencing local commissioning decisions’ (p.47)

- We have a duty to **involve the public** in our work and produce public reports
- We report to **Healthwatch England** and the **CQC, NHSE, NHS Shropshire, Telford & Wrekin, Shropshire Council** and are statutory members of the **HWBB**
- There is a **network of 152 local Healthwatch**



What have we done?

Since we were **established in 2013**, we have:

- ✓ Published **over 120 reports about people's experiences** of local health and social care services
- ✓ Published **over 80 Enter & View reports following visits by our volunteers** to care homes across Shropshire, hospital wards and clinics and GP practices to speak to people face-to-face
- ✓ Since 2016, provided the **Independent Health Complaints Advocacy Service** for Shropshire residents / people using NHS services in Shropshire - **to support people to understand and use the NHS complaints process and give alternatives to complaining**

Tell us

We want to hear about your experiences. We use this information to influence and inform service change across Shropshire.

Enter & View

We visit local services to see and hear for ourselves how they are provided. We collect people's opinions and produce reports to help improve these services.

Information & Signposting

We use our local knowledge to let you know what health and social care services are available to you.

NHS Complaints Advocacy

We have a free and independent advocacy service to support you with your NHS complaints.

2025-26: So far this year

1. Sustainability and resilience of Healthwatch Shropshire

- From July 2025 Healthwatch Shropshire became hosted by Community Resource (CR)



2. Public involvement

- Ensuring all **existing volunteers** are up-to-date with training and DBS, re-started our Enter & View visit programme, **on-going recruitment, promotion of opportunities** across health and social care (e.g. HTP)
- Currently developing a **Community Voice Panel** with CR – Q4

3. Inequalities

- Used our engagement functions to hear from –people who are living with **cancer** and shared our findings with the ICB to inform their Cancer Strategy, **Veterans** (including ‘Veteran Aware’), people and staff at **HMP Stoke Heath** regarding support post-release, inpatients at **The Redwoods**, people using **spinal injuries services**.

4. Prevention

- All engagement aims to **raise awareness of services** (e.g. college students access to mental health support) and **promote system campaigns** (e.g. Think which service)

5. Access and quality of services

- Providing information and signposting, and sharing our intelligence

The future of Healthwatch

- July 2025 Publication of Dr Penny Dash's Review of patient safety across the health and care landscape which proposed the **abolition of Healthwatch England and local Healthwatch**, with the statutory functions of local Healthwatch transferring to Integrated Care Boards (NHS Shropshire, Telford & Wrekin) and local authorities (Shropshire Council)

Recommendation 5: bring together the work of Local Healthwatch, and the engagement functions of integrated care boards (ICBs) and providers, to ensure patient and wider community input into the planning and design of services

- The Dash report informed the Governments new NHS 10 Year Plan published in July 2025 - Fit for the future: 10 Year Health Plan for England (p.89)

The risks, include...

- ❑ **Vulnerable people less able to advocate for themselves will not be heard.**
This includes people at risk of health inequalities.
- ❑ People who want to share an experience of care with an independent organisation *which hasn't been involved in their care* will not be heard. **This could mean that important local quality of care issues are missed.**
- ❑ Providers will focus their listening activities only on issues that are a priority for them; rather than **issues that local people tell us matter to them**. This could result in increased health inequalities and poor outcomes for priority populations and other vulnerable groups.
- ❑ **A strong independent voice for patients/service users and the general public will not be heard in strategic decision-making.**
- ❑ If feedback is gathered by providers, in relation to their own services, no one is tasked with listening to holistic **experiences across pathways of care**, and on whether integration is working for people.
- ❑ Over reliance on digital feedback due to the shift from analogue to digital in the NHS 10 Year Plan **Equalities impact assessment: 10 Year Health Plan for England - GOV.UK** (p.50)

What we know so far

July 2025

We joined 130 other local Healthwatch to sign [an open letter to the Secretary of State](#), Wes Streeting. The letter asked the government to rethink the proposals and set out our concerns.

October 2025

Local Healthwatch met with DHSC for the first time. We were told to expect a draft bill to go to Parliament between January and March 2026. This bill is expected to:

- Officially close Healthwatch
- Close NHS England
- Change how Integrated Care Boards work
- Make changes to health and social care laws.

November 2025

The public petition passed 10,000 signatures. As this reached over 10,000 signatures, the [government provided a response](#).

January 2026

Healthwatch Chairs and Chief Officers will meet again with DHSC on 28 January 2026. We expect to learn a lot more at this meeting.

Now 4th February

Ongoing in 2026

The King's Fund is continuing to [work with local Healthwatch](#) to explore what new legislation and future models could look like.

June 2025

The government announced that it [planned to close Healthwatch](#). They said our work would be taken over by the Department of Health and Social Care (DHSC) and the NHS.

August 2025

Local Healthwatch [launched a public petition](#) asking the government to review the decision to close independent Healthwatch, and to protect the public's independent voice in health and social care.

November 2025

The government confirmed that NHS restructures and redundancies will go ahead. This was announced in Wes Streeting's [NHS Providers Conference speech](#).

December 2025

Louise Ansari, the [CEO of Healthwatch England](#), will [step down](#) on 16 December 2025. Chris McCann will lead Healthwatch England until the organisation closes.

Early 2026

We expect more information about Healthwatch's future in the King's Speech. We do not yet know the date of this.

Early 2027

Once a new Bill is introduced, it is expected to take about a year to pass through parliament and become law. This means the new law and system could come into place in early 2027.

Healthwatch Shropshire is part of the network group working together to

- **protect the independent voice** (including public reporting of people's views and experiences of services)
- ensure we are involved in local discussions about **future arrangements** so that our knowledge and learning is not lost

Petition and response:
[Review decision to abolish independent local Healthwatch - Petitions](#)

Key questions to consider, include

Independence and credibility

- Can the DHSC confirm that LAs and ICBs will be able to commission **independent organisations/bodies to deliver 'Healthwatch functions'** once legislation has passed'? And will it be possible for them to jointly commission?
- What mechanisms will exist to manage **conflicts of interest**, particularly where commissioning and engagement sit within the same organisation?

Transparency, publication, and engagement

- Will organisations delivering Healthwatch functions under the new arrangements be required to **publish reports, findings, and recommendations publicly**?
- Where will this information be published, and **how will it be made accessible to local communities**?
- Will there be a requirement for **responses to recommendations to be public**, as is currently expected?
- **How will transparency be ensured** where patient voice functions sit within LAs or ICBs rather than independent organisations?

The ask today

1. There are a number of changes happening across the health and social care system at the moment, including the development of cluster arrangements as NHS Shropshire, Telford & Wrekin join with NHS Staffordshire and Stoke-on-Trent. Therefore, it is important for the **Health and Wellbeing Board to ensure the principle and function of independent feedback remains on the agenda and agree practical next steps.**
2. Seek clarification on the **mechanism for the transfer of Healthwatch functions** into the ICB and Shropshire Council, expected **implications for resources** and whether any mitigations are envisaged with regards to its **impact upon people's willingness to report experience and complain directly to providers and commissioners.**

