

Briefing on the decision to close Healthwatch England and the local organisations that make up the Healthwatch network

This briefing examines what will be lost if the plan to close the Healthwatch network goes ahead. It gives an outline of the type of work currently carried out by Healthwatch England and local Healthwatches, and concludes with a request to MPs to sign Early Day Motion 264 which opposes the closure. The Early Day Motion relates to the NHS Modernisation Bill 2026.

The plan to close Healthwatch

A decision has been taken to close Healthwatch England and the network of local Healthwatch organisations which gather and provide feedback on NHS and Social Care from patients and service users directly to decision-makers in central and local government and in the Department of Health and Social Care. An in-house NHS system of patient and user feedback is being developed to replace Healthwatch. Concerns have been expressed that this will leave the NHS marking its own homework and remove independent oversight of NHS services. It will also mean that feedback from patients will be fed through NHS planning processes, and will sit alongside and may conflict with other issues which are being fed through those processes. If the closure goes ahead, the direct route for feedback from patients and service users in local communities, with information about issues for particular groups such as fishermen and traveller communities to decision-makers will be lost.

The loss of the independence of Healthwatch from Government and the NHS and so of the independent patient- and user- voice

Healthwatch England is an independent part of the Care Quality Commission (CQC). The CQC is the regulator of NHS and Social Care services and is an arms length body which is operationally independent of the Government. There is a local Healthwatch in every local authority area. They are funded by local authorities but are independent voluntary organisations. While Healthwatch England is the national body which provides support to the local organisations, it works collaboratively with them but does not manage or govern them. The whole of the Healthwatch system is independent of both national and local Government. This system enables an independent patient voice. If the planned changes take place, this independence will be completely lost.

The plan to move patient- and user- feedback in-house to NHS bodies which are being drastically reduced

Healthwatch England and the network of local Healthwatches will be replaced by a Patient Experience Directorate, and a new national Director of Patient Experience in the Department of Health and Social Care, with consultation carried out by the local Integrated Care Boards (ICBs) which commission NHS services in their areas and by local authorities which run Social Care services. The number of ICBs is being reduced from 42 to about 26. The NHS Modernisation Bill gives a 50% reduction in numbers of staff in ICBs, with the staff of the Healthwatch network also being cut, as well as all of the staff in NHS England as that too is being cut. One aim of the NHS

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10-Year Plan is to reduce bureaucracy, although it is also conveniently reducing costs as well as the capacity of staff to cover the work of planning, commissioning, monitoring, patient involvement and feedback.

The planned change to digital feedback systems will exclude poorer and harder-to-reach groups from providing information about their experiences of services.

There is an intention to move to digital feedback systems. This is very likely to serve to exclude more marginalised groups, e.g. people who do not have or use computer equipment which will include poorer communities, many older people, homeless people, people whose first language is not English, and people from the traveller communities. Local Healthwatches use both face-to-face and online feedback and consultations systems with the aim of being inclusive. They have reached out to hard-to-reach groups and provided information about their needs.

The change to feedback mechanisms will also affect Social Care

While local authorities have well-developed systems of contact with local communities, local voluntary organisations usually have contacts with them in place, and Councillors are easily contactable, there have been severe cuts to their budgets and to voluntary organisations' funds. These changes will further reduce the capacity for service users' views to be taken on board.

The Work of Healthwatch

Local Healthwatches build relationships with particular communities in their areas, and with local service providers such as GP practices and care homes and with local residents. This both enables contact with hard-to-reach groups of patients, unpaid carers and service users, and enables constructive feedback about and to services. They gather views and information about how services are working and gaps in provision from patients and service users, prepare reports, provide training and liaison to local providers and raise issues with local Commissioners of services. Copies of their reports go to Healthwatch England. They also provide information about local services to residents.

There is a huge set of reports by local Healthwatches on a very wide range of issues from reports on individual services, patient experience of all NHS services in one area, on different types of service such as Mental Health and a Patient Advice and Liaison Service (PALS), on issues such as 'What does good care look like to local people?' and on 'the opportunities and risks of online provision'. Their work on the care needs of particular sectors of local communities has included: work by Healthwatches in Kent, Northumberland and East Sussex on the difficulties fishermen face in accessing healthcare, and the effects on their health of their working conditions with crucial feedback to local NHS services; a number of local Healthwatches, e.g. in Herefordshire, and Dorset have worked with traveller communities on their healthcare needs as they experience barriers such as refusal by GP practices to register people with no permanent address, low levels of literacy, lack of internet access, discriminatory behaviour towards them, and low levels of

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trust in statutory services, and Healthwatches have carried out training and liaison with local services to facilitate up-take of healthcare; a report on Healthwatch Northumberland's site gives information about the difficulty by unpaid carers in being able to take a break; work by local Healthwatches on healthcare for people from the wide range of Black and Minority Ethnic communities has uncovered some major issues such as racial stereotyping and a lack of understanding of dietary, religious and mental health needs in Hertfordshire; the need for faith-appropriate post-mortem procedures in Worcestershire, with recommendations made to healthcare providers and a number of Healthwatches around the country from Liverpool, to Croydon have carried out collaborative work with Healthwatch England on language barriers for people with limited or no English in a project called 'Lost for words', which led to a report on the issues these people face in using healthcare services. This kind of outreach work through connections with local communities and services is very likely to be lost if the plan to abolish Healthwatch and develop feedback systems in-house and online goes ahead.

Healthwatch England gather patient and service user information about services from local branches of Healthwatch, from direct submissions by members of the public to their website, from social media and surveys to find trends on which they write reports which go to the Department of Health and Social Care, to local authorities who manage social care, and when appropriate to Parliamentary Committees such as the one on Health and Social Care.

Reports by Healthwatch England are on major, national themes and they highlight particular risks and problems, e.g. their report on 'The State of Health and Social Care' picks out the issue of long waiting lists, and the risk of digital exclusion in relation to the planned Change from Analogue to Digital with the move to more services, access and communication being provided online. Evidence from Healthwatch has helped to lead to changes, e.g. to the development of a single patient record for each person which is currently being developed, to targets for improved GP access, to the pressure for better access to dentistry services, and to the plan to reform the NHS Complaints system by switching to a focus on continuous learning rather than on regulatory compliance.

Healthwatch England's report 'NHS complaints system lets people down, new research warns' dated 27 January 2025 gives particular cause for concern regarding the plan to close Healthwatch. To quote from the report: 'the investigation found serious failings in how the service listens to and responds to patient feedback. It highlighted that "the patient voice is simply not loud enough. There are real problems in responsiveness of services to the people they are intended to serve.' With the current NHS Complaints system deemed ineffective, if the planned closure of Healthwatch goes ahead, that will be very likely to close down much chance of bringing problems with NHS services into the open. The report is at <https://www.healthwatch.co.uk/news/2025-01-27/nhs-complaints-system-lets-people-down-new-research-warns>

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Healthwatch England's website is <https://www.healthwatch.co.uk/>

The cost of Healthwatch England and the Healthwatch network is comparatively very low

Healthwatch England had a budget of £3.35 million for 2025/26. The total NHS budget of the Department of Health and Social Care for that year is £217 billion.

There are 153 local Healthwatches which are each funded by the local authority for their area which has responsibility for Social Care. The total budget for local Healthwatches is £25.1 million a year. The total annual revenue budget for local authorities for the current year is £141.6 billion.

What Southern Region's Retired Members' Association would like Members of Parliament to do

Changes are based on the NHS 10-Year Plan, and are being taken forward via the NHS Modernisation Bill 2026 which will become law in about April 2027.

Please sign Early Day Motion 264 which opposes the closure of Healthwatch England and the network of local Healthwatches.

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