

# Speaking up for better care

Healthwatch in Devon, Plymouth and Torbay

Annual Report 2025/26



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# A message from our Chair

**“This year has again shown why independent public voice matters. Across Devon, Plymouth and Torbay, people have continued to share honest, detailed and often deeply personal experiences of health and social care with us.”**

“We have heard from people struggling to access GP appointments, families trying to navigate mental health support, patients managing long-term conditions, carers supporting loved ones, and people who need services to make reasonable adjustments so care is safe, fair and accessible.

Our role has been to listen carefully, identify themes, raise concerns, and work constructively with commissioners and providers so people’s voices are not only heard, but acted on. Over the year, 1,664 people shared feedback with us, 1,208 people were supported through our contact centre, and 457 concerns were escalated or referred to the right organisations.

We also published evidence-based reports on digital healthcare access, vaccination confidence, reasonable adjustments, hospital accessibility, the Royal Eye Infirmary and experiences of people living with Multiple Sclerosis. These reports have given local services practical insight they can use to improve care.

This year has also taken place against a backdrop of major change across health and social care. The NHS 10-Year Plan, the continued shift towards neighbourhood care, local strategies and plans, and wider local government reorganisation all point to a period of significant transition for services and communities.

Demographic change and an ageing population are causing increasing demand on already stretched services. We then welcome the plan to create this new model which aims to give patients real choice and control over their health and care. The intention is to deliver this transformational change through three radical shifts – hospital to community, analogue to digital, and sickness to prevention. However, such changes can only truly be progressed by genuine co-design and co-delivery with patients, Carers and their communities. The Health Bill proposes changes to Healthwatch and the transfer of its statutory functions, although future arrangements are still being developed. The proposed abolition of Healthwatch, without arrangements already in place for any alternative mechanism for genuinely independent monitoring and engagement, is a mistake, a step backwards, and a real missed opportunity.

During times of change, independent public voice is more important than ever. People need clear ways to share their experiences, raise concerns and influence decisions that affect how care is planned and delivered. Healthwatch has continued to provide that independent route – listening to people, sharing evidence, and helping partners understand what change feels like for the people using services.

Whilst there has been national discussion about the future of Healthwatch through the Health Bill, future arrangements are still being considered and our commitment remains the same: to make sure the voices of people in Devon, Plymouth and Torbay continue to be heard clearly, fairly and independently.”



**Chair of Healthwatch**  
in Devon, Plymouth & Torbay

***“I would like to thank our staff, volunteers, trustees, delivery partners, stakeholders and everyone who shared their experiences with us this year.***

***I would also like to recognise and thank two members of senior staff, Pat Harris and Tony Gravett, for their leadership, commitment and service as they are due to retire.”***

***- Dr Kevin Dixon***

# About us

Healthwatch in Devon, Plymouth and Torbay is your local health and social care champion.

**We are here to make sure NHS and social care leaders hear what local people are saying, understand what matters to them, and use that feedback to improve care.**

We listen to people's experiences, identify themes and trends, provide information and signposting, and share evidence with the organisations responsible for planning, delivering and regulating services.

## 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 work is independent. This means our agenda is shaped by what people tell us – not by the organisations that plan or provide services.**

## Equity

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

## Independence

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

## Impact

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

## Collaboration

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

## Truth

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

# How it works locally

Devon County Council, Plymouth City Council and Torbay Council jointly commission local Healthwatch in Devon, Plymouth and Torbay.

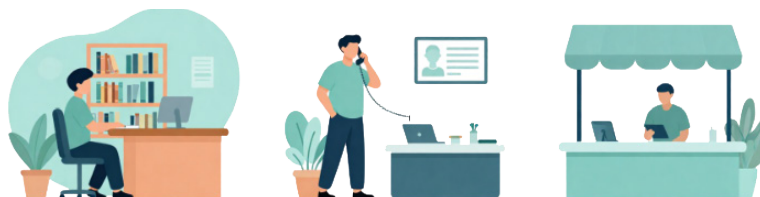
Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay are delivered by a collaborative partnership:



Although jointly commissioned, Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay retain their own local identities. This helps us understand local issues in each area while also spotting wider themes across the whole health and care system.

## How we reach people

We offer walk-in support in Torbay, local support in Plymouth, and Healthwatch Champions based within Citizens Advice services across wider Devon.



Although local Healthwatch organisations are funded by and accountable to local authorities, they are completely independent.

# Our year in numbers

In 2025–26, we supported 2,872 people to have their say or get information about their care. We employed 18 full or part-time staff, and our work was supported by 22 volunteers.

## Championing your voice

We published major reports about the improvements people would like to see in areas including digital healthcare access, vaccination confidence, Multiple Sclerosis care, reasonable adjustments, hospital accessibility and the Royal Eye Infirmary in Plymouth.

These reports were based on insight from at least 516 people and groups, plus a lived experience hospital walkthrough and a review of 6,795 patient feedback records, including 1,221 records referencing digital access.

## Reaching out:

**1,664**

People shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

**1,208**

People came to us for clear advice, information or support through our contact centre.

**457**

Complaints or concerns were escalated or referred to relevant organisations.

## Connecting with communities:

Our engagement staff, volunteers and Healthwatch Champions attended 122 outreach events, talks and meetings across Devon, Plymouth and Torbay. This included hospital visits, library drop-ins, community events, care home lay visits and local engagement sessions.

## Sharing insight online:



**51,000+** website visits

**190,000+** social media views

**12,000+** saw our email bulletins

# 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 Devon, Plymouth and Torbay. Here are a few highlights.

We met hundreds of people at community events, hospital drop-ins and local outreach sessions across Devon, Plymouth and Torbay.

Early feedback highlighted ongoing issues with GP access, hospital care, communication and social care. Our 2024–25 Annual Report showed how public feedback shaped local improvements.



We published our vaccination insight work, helping NHS Devon better understand why vaccine uptake is falling despite wide access.

People told us about vaccine fatigue, side-effect concerns and mistrust, while also praising staff and clinic processes.



We published new insight on people living with Multiple Sclerosis and patient experience at the Royal Eye Infirmary in Plymouth.

These reports highlighted unequal experiences, delays, communication problems and practical barriers that affect people's confidence, safety and wellbeing.



We published reports on reasonable adjustments in Torbay, accessibility at North Devon District Hospital, and digital access.

These reports showed how small changes – clearer communication, better signage, joined-up systems and person-centred support – can make a big difference.



# Working together to improve care

Healthwatch Devon, Healthwatch Plymouth and Healthwatch Torbay work together to make sure people's experiences are heard across the wider Devon Integrated Care System.

**Sharing is vital. Voices are heard.  
Your feedback creates change.**

This year, we shared local feedback with NHS Devon, local authorities, NHS trusts, public health teams, Local Care Partnerships, overview and scrutiny committees, Health and Wellbeing Boards, the Care Quality Commission and Healthwatch England.

Our role is not only to collect feedback, but to turn it into useful intelligence. This means identifying patterns, raising concerns, sharing evidence and asking services what they will do differently.

Examples this year include sharing insight on digital healthcare access, vaccination confidence, reasonable adjustments, hospital accessibility, Multiple Sclerosis care, mental health pathways, complaints, referrals, dentistry, pharmacy and GP access.

By bringing together individual stories and wider trends, we help decision-makers understand not just what is happening in services, but how it feels for the people using them.



# Listening to your experiences

**1,664** people shared their experiences of health and social care with us.

The most common things people shared across the year included access to services, treatment and care, administration, communication, staff, and the experience of navigating hospital and primary care services.

Hospital services and primary care featured strongly across the year, with people regularly raising issues around waiting, communication, appointments, follow-up and support.

In Quarter 4, Primary care remained the most common issue people told us about.

Out of **429** experiences shared...

**167**

Related to Primary care

**122**

Concerned GP services

**29**

Concerned Dental services

People contacted us in different ways, including our online Have Your Say form, telephone contact centre, community outreach, hospital drop-ins, local events, Citizens Advice routes and partner organisations.

In addition to you sharing your experiences, over **500** people and groups helped contribute to our reports on different areas:

Digital healthcare access

Vaccination confidence

Multiple Sclerosis care

Reasonable adjustments

Hospital accessibility

The Royal Eye Infirmary

You can view our website on any device and simply take a few minutes to share your own experience.

Every piece of feedback helps build a stronger evidence base for change.

From one person needing help today, to system-wide issues that need long-term improvement.



Visit: [www.hwdpt.org/have-your-say](http://www.hwdpt.org/have-your-say)

# Turning feedback into action



Some feedback needs immediate action. Across the year, we escalated or referred 457 concerns to relevant organisations.

This included signposting people to Patient Advice & Liaison Services (PALS), advocacy services, Healthwatch Champions, community support and providers, as well as raising serious or repeated concerns directly with services.

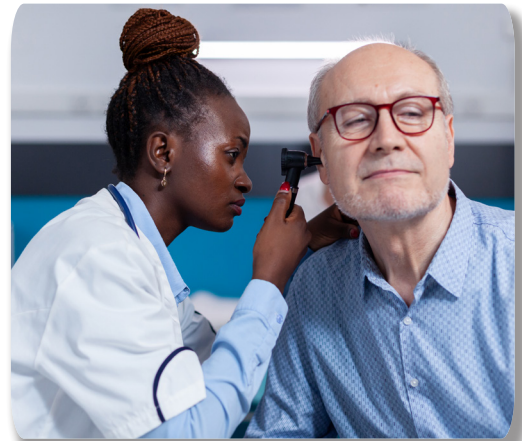
**Here is just a snapshot of some of the experiences you shared with us this year:**

## Healthwatch Case Studies:

### Audiology support in Devon

A person described distress and confusion after changes to audiology services left them unsure where to get hearing aid support and supplies.

We escalated the concern to NHS Devon and the person was able to speak to someone about their requirements.



### Medication issue resolved

A patient with a long-term mental health condition contacted us after medication was removed from their repeat prescription list.

We raised this with the GP practice, leading to direct contact from the lead pharmacist and improved prescription management.



### Safety concerns at a family hub

A parent raised concerns about safety and hygiene during a postnatal appointment.

We escalated this to Plymouth City Council and NHS Devon, leading to updated risk assessments and reminders around safety and infection control.



# Improving digital healthcare access

Digital access is now a major part of how people use NHS services.

Our digital healthcare access report brought together NHS App data, system mapping and patient feedback to understand how digital systems work in practice across Devon, Plymouth and Torbay.

Although published on 1 April 2026, the digital healthcare access report is included in this Annual Report because the research, analysis and engagement were completed during the 2025–26 reporting year.

## The report found that digital use is already widespread:

**60.2%** of Devon patients aged 13+ registered for the NHS App

**64 million+** recorded login events



## One digital front door

It also showed that patients are not using “one digital front door”.

Our review of 6,795 patient feedback records found 1,221 references to digital access.

Many are managing the NHS App, GP online triage tools, hospital portals, text messages, emails and letters at the same time.

People told us that unclear online triage processes, multiple portals, login issues and fragmented communication can increase stress rather than reduce it.

### What difference did this make?

The report recommended simplifying digital pathways, improving clarity about which systems to use, strengthening proxy access for carers, investing in digital inclusion, and testing digital changes with patients.

As digital access continues to grow, our message is clear: digital healthcare must make care easier – not harder.

### What NHS Devon said:

*“NHS Devon is committed to working with provider organisations, primary care, local authorities, the voluntary sector and people with lived experience to improve clarity, consistency and inclusion in digital healthcare.”*

Read the full report:

[www.hwdpt.org/report/2026-04-01/understanding-digital-healthcare-access-devon-plymouth-and-torbay](http://www.hwdpt.org/report/2026-04-01/understanding-digital-healthcare-access-devon-plymouth-and-torbay)

# Helping people navigate a complex digital NHS

Our digital healthcare access work showed that digital systems can improve access, but only when people know which system to use, what to expect and where to get help.

People across Devon, Plymouth and Torbay may use different online systems depending on where they live, which GP practice they attend, which hospital trust is involved in their care, and whether their appointments, letters, prescriptions or test results are available digitally.

This means some people are managing several systems at once. They may receive information by text, app notification, email, letter or online portal. For some, this works well. For others, it creates confusion, missed messages and extra effort.

Our report highlighted the risk of digital burden, where people are expected to manage multiple platforms, passwords, communication routes and instructions while also dealing with illness, caring responsibilities or limited digital confidence.

We also highlighted the importance of proxy access for carers, accessible non-digital routes, and support for people who do not have the devices, data, broadband, confidence or skills to rely on digital access.

The evidence has been shared with NHS and system partners to support ongoing improvements to digital access and patient experience.

## What NHS Devon said:

*“These are important findings, because digital transformation must make care easier.”*

## Impact:

Supporting our recommendations, NHS Devon has committed to working with partners to reduce unnecessary complexity and to ensure that digital innovation improves access, equity and patient experience for all our communities.



# Making reasonable adjustments work in practice

Our reasonable adjustments report in Torbay looked at how well services support people with disabilities, learning disabilities, neurodivergence and mental health needs.

The report found that tools such as hospital passports, digital flags and liaison roles are in place, but their impact is often limited by inconsistent use, low awareness and wider system barriers.

## Listening to Our Community

People and families told us that small, personalised changes, such as quieter spaces, flexible communication, staff continuity and involving carers – can make care safer and less distressing.

- ✓ Quieter spaces for comfort
- ✓ Flexible communication options
- ✓ Staff continuity & involving carers

## What Torbay and South Devon NHS Foundation Trust said:

*"We share the ambition to make reasonable adjustments part of everyday care, not the exception."*

## Impact:

The Trust said it will focus on practical steps including quieter spaces where available, reduced sensory triggers, plain English information, stronger staff awareness and better recording of reasonable adjustments through the new electronic patient record.

Personalised Environment



Better Communication



Continuity & Involvement

The report called for services to review how reasonable adjustments are identified, recorded and delivered, improve awareness of hospital passports and digital flags, and embed person-centred practice across services.

Torbay and South Devon NHS Foundation Trust welcomed the findings and recognised opportunities for practical improvement, including clearer signposting and reducing sensory overload.

The report showed that accessibility is not only about buildings or systems. It is also about listening, flexibility, compassion and making sure staff understand what each person needs.

**Read the full report:**

[www.hwdpt.org/report/2026-01-21/exploring-reasonable-adjustments-torbay](http://www.hwdpt.org/report/2026-01-21/exploring-reasonable-adjustments-torbay)

# Making hospital care easier to access

**This year, our work helped hospitals see their services through the eyes of the people using them.**

Hospital care can feel stressful, confusing or overwhelming, especially for people with sight loss, cognitive or communication challenges, mobility issues, mental health needs, neurodivergence or caring responsibilities.

We carried out focused work at the Royal Eye Infirmary in Plymouth and North Devon District Hospital. Both projects showed the value of practical lived experience. People were able to explain what it feels like to arrive, find your way around, wait for an appointment, hear your name called, use public transport, manage a disability or support someone as a carer.

The findings were practical and achievable. They included better signage, clearer maps, improved information, more visible volunteers, stronger communication, better use of hospital passports and digital flags, and staff training shaped by lived experience.

This work shows how Healthwatch can help services move beyond policy and see the real-world barriers people face when trying to access care.



# Improving experiences at the Royal Eye Infirmary

Healthwatch Plymouth gathered feedback from 59 patients and relatives about their experience of using the Royal Eye Infirmary at University Hospitals Plymouth NHS Trust.

People praised staff and consultants, describing them as helpful, pleasant and professional. But people with sight loss, visual impairment and additional vulnerabilities continued to face barriers throughout their visit.

## Strongest themes included:

- Travel
- Parking
- Bus access
- Wayfinding
- Signage
- Appointment letters
- Phone communication
- Anxiety caused while waiting for name to be called

For patients with no visual impairment, the service often worked well. For people with sight loss, the same journey could be much harder. Some people found it difficult to know when they had arrived by bus, find their way around the building, hear their name called, or manage long waits without updates.

University Hospitals Plymouth welcomed the findings and committed to reviewing patient letters, appointment information and website content for accuracy and accessibility. They also committed to improving telephone responsiveness, increasing volunteer support in reception and waiting areas, and working with local sight loss groups to improve signage, contrast, lighting and wayfinding.

This work builds on earlier Healthwatch engagement, which contributed to practical improvements including a pedestrian crossing, improved signage and a new bus route.

We also presented the walkthrough video to more than 100 REI staff at their away day, helping staff see how the building and patient journey can feel for people with visual impairment.

### Read the full report:

[www.hwdpt.org/report/2025-11-18/patient-experience-using-royal-eye-infirmary-report](http://www.hwdpt.org/report/2025-11-18/patient-experience-using-royal-eye-infirmary-report)

### What University Hospitals Plymouth NHS Trust said:

*"We recognise and take seriously the difference in experience for patients with sight loss, visual impairments, or additional vulnerabilities, and we are committed to ensuring that our services are fully inclusive and accessible to all."*

### Impact:

The Trust said the findings will inform work to improve patient communications, telephone access, waiting information, volunteer support, signage, contrast and wayfinding.

# Using lived experience to train and inform staff

Alongside the published Royal Eye Infirmary report, Healthwatch Plymouth also supported further learning by helping staff understand what a visit can feel like for people with sight loss or visual impairment.

This included walkthrough video work using visual filters to show how different eye conditions can affect what a person sees when moving through the building.

The aim was to bring patient experience to life. Rather than only describing barriers in a report, the walkthrough helped staff see how signs, lighting, contrast, layout, distance, glare and busy spaces can affect someone trying to attend an appointment independently.

**This type of work helps create empathy and supports practical improvement. It shows how the same building can feel very different depending on someone's sight, confidence, mobility, health needs or support network.**



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## Working together to improve care

By combining patient feedback, direct engagement, report recommendations and staff learning, this work helped turn lived experience into a practical tool for improving care.

It also showed the value of Healthwatch working constructively with services – listening to patients, identifying barriers, and helping providers understand what changes could make a real difference.



### Signage

Signs may be unreadable due to size, contrast or distance



### Contrast

Low contrast surfaces and edges become invisible



### Busy Spaces

Crowds and movement create anxiety and can overwhelm



### Lighting

Dim or uneven lighting makes navigation harder



### Distance

Long corridors with few landmarks are difficult to navigate



### Layout

Unfamiliar or complex layouts cause disorientation

# Making North Devon District Hospital more accessible

This work provided a strong lived-experience evidence base to support ongoing improvements to accessibility and inclusion for patients and carers.

## Lived Experience Walkthrough – North Devon District Hospital

At North Devon District Hospital, Healthwatch Devon worked with Headway North Devon on a lived experience walkthrough with people who have cognitive and communication challenges.

The walkthrough explored what it feels like to access the hospital, move through the building, understand information, speak to staff, manage sensory environments and find the right place.

### Participants highlighted:

Participants highlighted the value of hospital volunteers, who were seen as approachable, visible and helpful. They also described the importance of carers, who often play a vital role in helping people feel safe, understand information and manage appointments.

### Practical areas for improvement:

- Signage
- Maps
- Lighting
- Sensory overload
- Toilet information
- Wider awareness of hospital passports and digital flags
- Flooring
- Staff identification
- Emergency information

### What the Learning Disability Team said:

*“The team noted that this is a comprehensive report with a number of clear and achievable ‘quick wins’, particularly around signposting.”*



### Impact:

The hospital team said the feedback on maps, colour, font choice, “You are here” markers and sensory overload was especially useful in helping them reflect on how overwhelming hospital spaces can feel.

### Read the full report:

[www.hwdpt.org/report/2026-01-22/lived-experience-accessing-north-devon-district-hospital](http://www.hwdpt.org/report/2026-01-22/lived-experience-accessing-north-devon-district-hospital)

# Improving care for people living with Multiple Sclerosis (MS)

**Our MS insight report explored the experiences of 89 people living with Multiple Sclerosis across Devon and Torbay.**



People described inconsistent experiences of diagnosis, treatment, ongoing care and communication.

Some waited months or years for answers. Others reported delays to treatment, difficulty contacting specialists, limited follow-up and uncertainty about next steps.

These delays had both emotional and physical impact, increasing anxiety and leaving some people feeling overlooked.

The report recommended standardising MS diagnostic processes, exploring the impact of diagnostic delays, using a 12-week treatment initiation goal after diagnosis as a benchmark, investigating regional differences in care, and making annual comprehensive reviews routine.

The report gives commissioners and providers clear lived-experience evidence about how variation in care affects people's lives day to day.

This work helped make visible the experiences of people living with a long-term condition that can affect every part of life – from mobility and work to family life, wellbeing and confidence in services.

## **What the MS service said:**

*"This feedback from patients is valuable learning as we seek to continuously improve the care we offer."*

## **Impact:**

This means the experiences shared by people living with MS have been recognised by the specialist service as useful learning to support ongoing improvement in person-centred care. As a result of reading our report, the national MS Society have reached out to us for help looking at potential issues they have identified with MS clinical services in Plymouth.

**Read the full report:**

[www.hwdpt.org/report/2025-11-07/living-multiple-sclerosis-devon-and-torbay](http://www.hwdpt.org/report/2025-11-07/living-multiple-sclerosis-devon-and-torbay)

# Building trust in vaccination programmes

Our vaccination insight report explored why uptake among some at-risk groups is declining, despite widespread access to vaccination services.

A total of **298** people contributed through face-to-face and online survey work.

The report was shared with NHS Devon to support future public health planning.

Most people were satisfied with invitations, booking and clinic processes, and many praised vaccination staff. However, the report also identified concerns about side effects, mistrust of vaccination programmes, confusion around shingles eligibility and clear signs of vaccine fatigue – where people feel tired of repeated vaccination messages or offers and become less engaged over time.

NHS Devon acknowledged the findings and committed to using the insight on vaccine hesitancy to refine future communication strategies, including addressing fatigue and concerns about side effects.

The findings showed that improving uptake is not only about availability. It is also about trust, clarity and honest communication.



## What NHS Devon said:

*"This valuable piece of work will help inform how we deliver local vaccination programmes and keep vaccination uptake high, keeping our local population safe and well."*

## Impact:

NHS Devon said it will continue working with local communities to understand barriers to vaccination, improve access to accurate information, and adapt outreach and mobile offers where uptake is lower.

**Read the full report:**

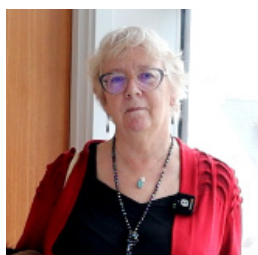
[www.hwdpt.org/report/2025-10-28/changing-attitudes-vaccination-devon-plymouth-torbay](http://www.hwdpt.org/report/2025-10-28/changing-attitudes-vaccination-devon-plymouth-torbay)

# Hearing from all communities

We know that some people face more barriers to being heard, accessing services or getting the right support. This year, we made sure our work included people whose experiences are too often missed.



Barnstaple resident



Exeter resident



Plymouth resident



Ivybridge resident



Torbay resident

This included people with sight loss, people with cognitive and communication challenges, people with learning disabilities, neurodivergent people, people with mental health needs, people living with MS, carers, older people, people using community and hospital services, and those who may be digitally excluded.

We gathered feedback through hospital visits, community events, libraries, community hubs, Citizens Advice routes, online forms, telephone support, targeted insight work and trusted local partners.



St Budeaux and Barne Barton Wellbeing Hub  
Plymouth



Paignton Community Hub  
Paignton Library



Barnstaple Library  
Barnstaple

By going to where people already are, and by working through trusted relationships, we heard experiences that may not have reached services through formal routes alone.

This approach helps make sure health and care services hear from people who may be less likely to complete online surveys, attend formal meetings or raise concerns directly with providers.

# Reaching people where they are

Between 1 April 2025 and 31 March 2026, our engagement staff, volunteers and Healthwatch Champions attended 122 outreach events, talks and meetings across Devon, Plymouth and Torbay.



These included library drop-ins, hospital drop-ins, community wellbeing events, vaccination hubs, health and wellbeing meetings, care home lay visiting, Paignton Community Hub activity, Royal Eye Infirmary visits, North Devon District Hospital outreach, Tavistock, Okehampton, Holsworthy, Newton Abbot, Torrington, Derriford and Torbay Hospital activity.

Our engagement took place across Devon, Plymouth and Torbay, reflecting the size and diversity of the area we cover.



We heard from people in rural communities, coastal towns, hospitals, libraries, care homes, community hubs, local events and through trusted partner organisations.

This community presence matters. It gives people more informal, accessible ways to share their experiences and helps Healthwatch build a clearer picture of what is happening across different places, services and communities.

# Information and signposting

Healthwatch does not only collect feedback.  
**We also help people understand where to go next.**

## 6 This year, 1,208 people were supported through our contact centre

People came to us for help with complaints routes, GP access, social care, hospital concerns, mental health support, dentistry, referrals, hospital discharge, medication issues and care for relatives.

Where needed, we gave advice and information, referred people to Healthwatch Champions, signposted to PALS, advocacy or community support, or escalated concerns to providers and commissioners.

For many people, the most important thing we do is help them take the next step when they feel stuck, ignored or unsure where to turn.

This support can make a real difference. It helps people understand their rights, find the right service, raise a concern, access advocacy, or feel less alone when trying to navigate a complex health and care system.

### Some of the things you contacted us about:

Complaints routes

GP access

Hospital concerns

Mental health

Referrals

Discharge

Social care

Care for relatives

Dentistry

Medication issues

### The difference our support makes.

This year our support helped people to:

Understand their rights

Find the right service

Raise a concern

Access advocacy

Feel less alone navigating a complex system

# Volunteers and community reach

Volunteers continue to play a vital role in the work of Healthwatch in Devon, Plymouth and Torbay (HWDPT).

Volunteers help us listen to people, gather feedback, support outreach, review services and make sure public voice is heard in more places.

This year, volunteers supported community engagement, hospital visits, outreach activity and care home lay visiting work.

They helped us have conversations with people in local communities, supported feedback gathering, and contributed to work that helped services understand real experiences of care.



**Dr Kevin Dixon**

HWDPT  
volunteer Chair



**Roger & Mary**

Plymouth  
volunteers



**Adrien Collins**

Devon  
volunteer



**Pat Teague**

Torbay  
volunteer

**Volunteers bring time, local knowledge, compassion and independent insight.** They can help people feel comfortable sharing honest feedback, particularly in community settings or during visits where people may not otherwise speak up.

We are grateful to every volunteer who has given their time, care and commitment to support our work this year.

Volunteers help Healthwatch reach further, listen better and bring more lived experience into local service improvement.

# Care home lay visiting

During 2025–26, our skilled Enter and View team carried out many care home lay visits, predominantly in Plymouth.

## “Something Someone Told Me”

These visits helped us hear directly from residents, relatives and staff about day-to-day experiences of care, wellbeing, communication and life in care homes.

In Plymouth, the “Something Someone Told Me” care home lay visiting project helped restart structured conversations with care home residents, relatives and staff.

The approach used open conversations to explore what matters to people living and working in care homes, including identity, community, shared decision-making, health and positive culture.

This work helps ensure that people living in care homes are included in conversations about health, wellbeing and quality of care.

It also gives care homes an opportunity to reflect on what is working well, what could be improved, and how residents’ voices can be heard more clearly.

The insight gathered helps us identify themes, share learning and support ongoing improvement in residential care.



**Visit:**

[www.hwdpt.org/news-and-reports/](http://www.hwdpt.org/news-and-reports/)

# Sharing intelligence and influencing

## We use feedback to support local decision-making and improvement.

This includes responding to requests for information, sharing insight with regulators, supporting consultations and contributing to system discussions.

During the year, we provided intelligence to organisations including the Care Quality Commission, NHS Devon, local authorities, NHS trusts, scrutiny committees and other system partners.

We also responded to requests linked to inspections, service design, community services, statutory Quality Accounts, health and social care, mental health, and wider patient experience wider patient experience.

Our role is to make sure public feedback is not left sitting in a database. We turn it into clear, timely insight that can help services understand risk, improve communication and act on what people are experiencing.

**The value of Healthwatch is not only in what we hear. It is in making sure that insight reaches the people who can act on it.**

### Topics informed by local feedback:

Patient experience

Community services

Inspections

Mental health

Digital access

Quality accounts

Social care

Service design

This year, public feedback helped inform local conversations about statutory Quality Accounts, digital transformation, reasonable adjustments, hospital accessibility, long-term condition pathways, vaccination confidence and wider patient experience.

# Finance and future priorities

Healthwatch in Devon, Plymouth and Torbay is jointly funded by Devon County Council, Plymouth City Council and Torbay Council.

**In 2025–26 we received £568,108.**

**Devon County Council**

**£350,000**

This is an overall increase of £5,624 compared to 2024–25.

**Plymouth City Council**

**£122,308**

The Plymouth City Council contribution increased by £5,824.

**Torbay Council**

**£95,800**

## Income overall:

Contract funding: £568,180.00

Additional income: £720.00

Carry in: £8,530.84

**Total income: £577,358.84**

## Expenditure overall:

Staffing £429,085.10

Operational £47,117.08

Support £62,282.62

Return to HWDPT: £0.00

**Total expenditure: £538,484.80**

**Underspend: £38,874.04**

## Our future priorities:

As national changes to Healthwatch are considered, we will continue to work independently and constructively with local partners. Our priority is to make sure people in Devon, Plymouth and Torbay can still share their experiences, raise concerns and influence decisions about health and social care.

**Future priorities are being reviewed in line with ongoing contractual transition and service planning arrangements.**

# Statutory statements

## Local Healthwatch decision-making

**Healthwatch in Devon, Plymouth and Torbay are jointly commissioned by Devon County Council, Plymouth City Council and Torbay Council.**

The service is delivered by a collaborative partnership of Colebrook South West Ltd, Engaging Communities South West and Citizens Advice Devon.

Although the services are jointly commissioned and delivered through one partnership, each local Healthwatch retains its own identity and local focus.

This helps us understand and respond to local issues in Devon, Plymouth and Torbay, while also identifying wider themes across the whole health and care system.

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## How we involve local people

We involve local people through a wide range of routes, including online feedback forms, telephone contact, email, face-to-face outreach, hospital visits, community events, library drop-ins, Citizens Advice routes, targeted engagement projects and voluntary sector partners.

We also work with volunteers, local groups and people with lived experience to help us reach communities whose voices are less often heard.

This year, our work included targeted engagement with people with sight loss, people with cognitive and communication challenges, people with learning disabilities, neurodivergent people, people with mental health needs, people living with MS, carers, older people and people at risk of digital exclusion.

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## Enter and View activity

During 2025–26, our skilled Enter and View team carried out many care home lay visits, predominantly in Plymouth.

These visits helped us hear directly from residents, relatives and staff about daily experiences of care, wellbeing, communication and life in care homes.

This included work linked to the “Something Someone Told Me” approach, using open conversations to understand what matters to people living and working in care homes.

The insight gathered helps us identify themes, share learning and support ongoing improvement in residential care.

# Statutory statements continued

## Responses to reports and recommendations .....

When we publish reports, we share them with relevant providers, commissioners and system partners. Where appropriate, we ask organisations to respond to our findings and recommendations.

This year, our reports and recommendations were shared with organisations including NHS Devon, University Hospitals Plymouth NHS Trust, Torbay and South Devon NHS Foundation Trust, Royal Devon University Healthcare NHS Foundation Trust, public health partners and wider system colleagues.

Responses were included in reports where received. These responses show how public feedback is being used to inform service learning, communication, accessibility, digital access and patient experience improvements.

## Using your feedback .....

We use feedback to identify themes, raise concerns and share evidence with people who plan, deliver and regulate services.

This includes sharing intelligence with local authorities, NHS Devon, NHS trusts, the Care Quality Commission, scrutiny committees, Health and Wellbeing Boards, Healthwatch England, our local MPs, local councillors and other system partners.

We also use feedback to support people directly, by giving information and signposting, escalating concerns where appropriate, and helping people understand their options.

**Our work is shaped by what people tell us.**

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**Every experience shared with Healthwatch  
helps us speak up for better care.**

# Outcomes and impact 2025 – 2026

Your feedback has led to practical changes, formal commitments, staff learning & stronger evidence for service improvement.

## Royal Eye Infirmary

Feedback helped University Hospitals Plymouth focus on improving letters, website information, phone access, volunteer support, signage, contrast, lighting & wayfinding for people with sight loss.

## REI staff learning videos

Walkthrough videos using sight-loss filters helped staff better understand what attending the REI can feel like for visually impaired patients, turning lived experience into practical learning.

## North Devon District Hospital walkthrough

Feedback from people with cognitive & communication challenges gave the hospital clear “quick wins” on signposting, maps, “You are here” signs, sensory overload & staff awareness.

## Digital healthcare access report

Analysis of 6,795 patient feedback records, including 1,221 about digital access, gave NHS Devon & partners evidence to make digital routes clearer, more consistent & more inclusive.

## Vaccination confidence report

Feedback from 298 people gave NHS Devon insight into vaccine fatigue, side-effect concerns, trust & access, helping shape future vaccination communication, outreach & mobile offers.

## Living with MS report

89 people living with MS highlighted delays, variation and communication gaps. The MS service recognised the findings as valuable learning, & they contacted us about further local concerns.

## Care home lay visiting

Care home lay visits, mainly in Plymouth, helped residents, relatives & staff share what matters to them & restarted structured conversations about daily life, wellbeing & quality of care.

## Public voice during system change

Our evidence was shared with providers, commissioners, scrutiny, MPs, the CQC & system partners, helping keep independent public voice visible during major health & care change.

## Regulatory intelligence shared

Healthwatch provided patient stories and intelligence to the Care Quality Commission & adult social care partners, helping public feedback inform inspection, assurance & quality work.

## Reasonable adjustments in Torbay

Torbay & South Devon NHS Foundation Trust committed to practical improvements, including quieter spaces where available, reduced sensory triggers, plain English information, stronger staff awareness & better recording of adjustments.

## Direct casework and escalation

We escalated or referred 457 concerns. Individual feedback led to practical action on issues like audiology supplies, repeat prescription support, safety & infection control reminders at a family hub.

Every outcome started with someone sharing their experience.  
That is the value of Healthwatch: turning people’s stories into evidence, action and improvement.

# Celebrating a legacy of listening and a lasting contribution.

This September, we say farewell to a champion who has made every voice count, and put people at the heart of change.

“Before Healthwatch, I spent many years working in the NHS as a nurse. I have always believed that good care starts with listening. It starts with seeing the whole person, not just the condition, appointment or service pathway.”

***“That belief has stayed with me throughout my career and has shaped the way I see the role of Healthwatch.”***

“Health and care services are now moving through one of the biggest periods of change we have seen for many years. The NHS 10-Year Plan, the shift towards neighbourhood care, digital transformation, local strategies and plans, local government reorganisation, and changes to how services are planned and delivered will all affect local people.

Some of this change brings real opportunity. Care closer to home, better prevention, joined-up services and more support in communities are all things people have asked for. But change must be shaped by the people who use services, not only by the organisations that plan or provide them.

That is why independent public voice matters so much. It is not an optional extra. It is a vital part of safe, fair and accountable care.

Over the years, Healthwatch has helped people speak up when they felt unheard. We have heard from patients, carers, families, care home residents, people with disabilities, people living with long-term conditions, people struggling to access services, and people who simply wanted to share what good care should look like.

We have also worked with NHS, social care, local government and voluntary sector partners who have listened, responded and used public feedback to improve services.”

***“I want to thank those partners for recognising the value of honest, independent insight.”***

# A lasting message from Pat

## The future of Healthwatch

“The future of Healthwatch and its statutory functions is now part of national discussion through the Health Bill. Whatever happens next, the principle must not be lost. People in Devon, Plymouth and Torbay must continue to have trusted, independent and accessible ways to share their experiences, raise concerns and influence decisions about health and social care.

I am proud of what Healthwatch in Devon, Plymouth and Torbay has achieved. I am proud of our staff, volunteers, trustees and delivery partners, who have worked with care, skill and commitment across a large and diverse area. I am also deeply grateful to every person who shared their story with us.

Those stories matter. They help services understand what is working, what is not, and what needs to change.

As I step away, my hope is that the future of health and care continues to be shaped by the people it exists to serve. Services change, structures change and legislation changes – but the need to listen to people, independently and with respect, remains constant.

As health and care continues to change, our partnership remains committed to supporting local organisations with the same high-quality independent support, trusted insight and expert engagement for our communities.”



**Strategic Lead for Healthwatch  
in Devon, Plymouth & Torbay**

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***“As I retire later this year, I want to take this opportunity to thank everyone who has supported Healthwatch in Devon, Plymouth and Torbay – not only during the past year, but since Healthwatch began”***

***- Pat Harris***

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# healthwatch

in Devon, Plymouth and Torbay



[www.hwdpt.org](http://www.hwdpt.org)



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