



Speaking up for better care

Healthwatch Sandwell annual report 2025/26

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Alexia Farmer

**Manager
Healthwatch Sandwell**

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The NHS is a big part of everyday life in Sandwell, and we all know it's under a fair bit of strain. One of the best ways to keep things moving in the right direction is by listening to peoples' experiences. Every bit of feedback—whether it's praise, a worry, or a suggestion—helps the people on the front line see what's working and what might need a bit of fixing, so care can be safer and better for everyone.

We just want to take a moment to say a proper thank you to everyone local who's taken the time to speak up and share their stories, and to the health and care staff who've taken that on board and made changes where it counts. That kind of effort and care really does make a difference to our community.

A message from our chair

Over the last year, Healthwatch Sandwell has continued to play an important role in representing the views and experiences of local people during a period of significant change across health and social care services. While there have been challenges, including the announcement that Healthwatch will be abolished in the future, there have also been many positive achievements that demonstrate the commitment, resilience and impact of our team, volunteers and Board members.

The publication of the NHS 10-Year Health Plan signals a continued shift towards prevention, greater use of digital technology, and delivering more care within communities and people's homes through integrated services. Throughout this period, Healthwatch Sandwell has worked to understand what these changes mean for local residents, ensuring opportunities are realised whilst highlighting barriers that may affect access, experience and outcomes.

Listening to patients, service users and carers remains central to everything we do. Through our involvement in key partnership forums, including the Health and Wellbeing Board and the Health and Social Care Overview and Scrutiny Board, we have continued to influence decision making, champion the needs of local people and support improvements to services.



I would like to thank our Board members for their time, expertise and commitment, including their support for key initiatives such as Enter and View and improving dementia care in care homes. I also recognise our dedicated staff team, who deliver high-quality engagement, advice and project work within a small team, helping strengthen relationships and ensure local voices are heard. As we look ahead, we remain committed to listening to local people, working with partners, and ensuring the patient voice shapes health and care services across Sandwell.



Chair
Amritpal Randhawa

About us

Healthwatch Sandwell 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 30,500 people to have their say and get information about their care. We employed **6** staff and, our work was supported by **5** volunteers.



Reaching out:

2,640 people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

27,861 people came to us for clear advice and information on Health and Social Care services.



Championing your voice:

We published **16** reports about the improvements people would like to see in areas like **Cancer Services** and **SEND**.

Our most popular report was Patients Experiences of Cancer Services, highlighting people's struggles in **delays, communication failures, and inconsistent emotional support**.



Statutory funding:

We're funded by the Local Authority. In 2025/26 we received £179,000 which is the same as last year.

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 Sandwell. Here are a few highlights.

Spring



Healthwatch Sandwell supported the Joint Carers Strategy Implementation Group by bringing carers' experiences into discussions, sharing feedback from local engagement, and helping the local authority shape services, monitor progress, and ensure the strategy meets the real needs of carers.

Summer



Within the ICB Digital Inequalities Group, Healthwatch Sandwell ensures people's experiences are heard by consistently bringing forward real feedback from local residents about barriers to accessing digital health services. They highlight issues such as lack of digital skills, access to devices, or connectivity, and advocate for inclusive solutions. By working with partners, they help turn this insight into action, influencing service design and improvements so changes better meet the needs of those most affected by digital exclusion.

Autumn



Healthwatch Sandwell supported the local authority by using existing insight and feedback to highlight key needs of older people, helping shape a community prevention service that is proactive, accessible, and aligned with known local challenges.

Winter



Healthwatch Sandwell supported the Pharmaceutical Needs Assessment (PNA) by gathering community feedback through engagement activities and ensuring local experiences of pharmacy services informed public health planning. They also contributed to PNA steering group meetings, sharing resident insights, highlighting access issues, and helping shape discussions so decisions were inclusive, evidence-based, and reflective of local needs.

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 Sandwell this year:



Creating empathy by bringing experiences to life

Hearing personal experiences from people with sensory impairments and people with learning disabilities finding their way to appointments at the Midlands Metropolitan University Hospital (MMUH).

Feedback from both groups was positively received by the Sandwell and West Birmingham Hospital Trust (SWBHT) Patient Experience Group. The group considered the recommendations carefully and committed to making necessary adjustments to improve future patient experiences. It was hoped that this feedback would support the Trust in securing future funding for more appropriate signage.



Getting services to involve the public

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

We spoke with people waiting for treatment in A&E and Children's A&E at MMUH to gain insight into waiting times and the care they received. Feedback from patients and families reflected a range of positive, negative, and mixed experiences. These findings were acknowledged by Sandwell and West Birmingham Hospital Trust and formally recorded at a Patient Experience Group meeting.



Improving care over time

Change takes time. We work behind the scenes with services to consistently raise issues and bring about change.

Healthwatch shares feedback with the ICP Digital Inequalities Group, highlighting how the NHS App does not work for everyone and reflecting the experiences of digitally excluded people. This helps the group consider practical, inclusive solutions so digital services complement accessible, person-centred care.

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.



The patient experiences of knee arthroplasty referred to as a total knee replacement

What did we do

We followed a patient's journey from pre-operative care through discharge and into recovery at MMUH.

Key things we heard:



- Clearer and more accessible communication through letters, text messages, and digital support apps
- Reduced waiting times for pre-assessment blood tests
- Greater privacy and empathy on admission.

Our work showed, further improvements were needed in the quality of care during ward recovery, as well as ensuring essential support aids, such as spectacles, are readily available during surgery preparation and throughout recovery.

What difference did this make?

By sharing this report with SWBHT there have been multiple actions initiated to improve the experience:

- Patient information provision – via Pre-Assessment and 'Hip & Knee Club' education sessions.
- Thoughtful changes in practice – for example, positioning of weight/height measurements in CAU, allowing essential items such as spectacles in theatre, overnight practice to aid restful sleep on wards, proactive advice re: best sleeping position post-surgery, provision of ice packs to reduce swelling and pain.
- Proactive discharge equipment and advice planning – Included in the Pre-admission patient information and education sessions, as well as during ward recovery.
- Implemented telephone Follow-Up by Ward Senior Nurse – at 72 hours post-op for early identification and resolution of any concerns or complications. This is a new practice in addition to standard Physiotherapy and Consultant follow-up schedules.

Patient Experiences of Cancer Services in and around Sandwell

We wanted to find out what was going well and what people think need improving in Cancer services in around Sandwell.

We spoke with people who had accessed cancer services in the last 18 months, this included people who were currently receiving treatment as well as those who had completed treatment and were accessing support.

Key things we heard:



Our findings highlight how delays, communication failures, and inconsistent emotional support can have a lasting impact on patients and families. These experiences often increased anxiety, reduced trust in services, and compounded distress during an already vulnerable period.



"I was initially diagnosed with Ovarian Cancer, started to get symptoms and pain and called the GP. I explained to the GP that something just wasn't right, and the GP put me on a fast track. I was informed that I would receive a letter in 2 weeks but with no prevail. I called the hospital who stated their apology in not sending the letter."

"After realising I was being mixed up with other patients I had to make a formal complaint and this did leave me with a lot of distress which added to the distress adding to the distress which I was already going through."

What difference did this make?

Our report made a meaningful difference by ensuring the lived experiences of patients and carers were heard by commissioners and service providers. By gathering and presenting clear evidence about challenges such as access, communication, coordination of care, and emotional support, the report helped highlight gaps that were not always visible through performance data alone. Its findings supported informed discussions with NHS partners, influenced service reviews and action planning, and helped prioritise improvements focused on person-centred care. Most importantly, the report gave patients a collective voice, helping services better understand what matters to people affected by cancer and driving positive change across the local system.

Special Educational Needs and Disability

This year, the project explored parents' experiences of Special Educational Needs and Disability (SEND) provision in mainstream schools across Sandwell.

It gathered feedback from families to understand how well current support meets children's needs, highlighting areas where provision is effective as well as where improvements are needed to ensure all children receive appropriate and inclusive support.

Needs of children when in school Types of needs reported by parents (children may have multiple needs)



- Neurodevelopmental (26%)
- Learning support (17%)
- Emotional / Mental Health (10%)
- Personal care (10%)
- Environmental adjustments (5%)
- Social / other (5%)
- Other (4%)

4. A wide range of smaller needs still matters (4–8% each)

Categories like social needs, environmental adjustments, and multiple needs show that support must remain flexible and inclusive.

1. Neurodevelopmental needs are most common (26%)

Over a quarter of children require support related to neurodevelopmental differences, making this the largest single category and a key area for school resources.

2. Learning and emotional support are major priorities (27% combined)

Learning support: 17% and Mental Health/Emotional: 10% These together show that academic and emotional wellbeing are closely linked, and both require strong provision.

3. Communication needs are significant (11%)

More than 1 in 10 children need help with communication, highlighting the importance of speech, language, and interaction support in schools.

5. Many children have overlapping needs

The data shows that children may have multiple needs, meaning holistic, coordinated support is essential rather than isolated interventions.

Special Educational Needs and Disability (SEND)

Parent feedback shows a clear gap between the SEND support children are entitled to and what is delivered in mainstream schools, with key provision often inconsistent or absent. Many families report poor communication, lack of action on concerns, and unreliable implementation of support plans. Combined with staffing, demand, and funding pressures, this leaves schools struggling to meet complex needs and many families feeling unsupported.

Key things we heard:



- Lack of clear information sharing limits parents' ability to support their child and agreed support is not always consistently implemented.
- Challenges such as less visible needs and the use of punitive approaches instead of supportive strategies further affect children's experiences.
- Wider pressures, including limited staffing, high demand, and funding constraints, raise concerns about schools' capacity to meet complex needs.
- Overall, while some positive experiences exist, many families feel unsupported, highlighting the need for consistent improvements through SEND reforms.

What we recommended.

The findings highlight the need to strengthen oversight of Education, Health and Care Plan (EHCP) delivery, improve communication and co-production with parents, and invest in SEND training to support inclusive practice. They also emphasise the importance of earlier intervention, better access to therapies and specialist advice, increased support for mainstream schools, reducing delays in assessment and EHCP processes, and improving transition planning for families.

Future Impact

As part of Sandwell Council's SEND transition plan, this report seeks to ensure that parents' views, lived experiences, and recommendations directly inform and shape improvements in service delivery and support for children with SEND.

Providing an independent and authentic account of current parental perspectives, the report is intended to support commissioners and service providers in developing a clear, evidence-led plan for meaningful and sustained change.

Hearing from all communities

We're here for all residents of Sandwell. 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:

- Listening to the experiences of those with Sickle Cell and Thalassemia
- Visiting the SCAT Centre and the new Midland Metropolitan Hospital
- Working with Sandwell Oscar service to listen to service users.



Listening to Sickle Cell and Thalassaemia Communities

We listened to people living with Sickle Cell and Thalassaemia (SCD) following the relocation of services to Midland Metropolitan University Hospital

Our focus was on ensuring voices from all communities were heard and that learning from lived experience helped shape service improvement during this transition.

Patients reported a mix of positive and challenging experiences. Many highlighted high levels of satisfaction with the quality of care, particularly valuing access to specialist haematology consultants and the consistently compassionate and skilled nursing care.

“My experience overall has been okay. The department is specialised and quite different from inpatient ward such as haematology. I usually come to SCAT for pain management”

Alongside these strengths, patients raised concerns about access, follow-up care, staffing levels, pain management, and the availability of specialist support, particularly in emergency and community settings.

“Aftercare is lacking I feel like it would be good to have follow-ups, however, there are of patients with SCD so it would be practically difficult”

“Allowing direct contact with the nurses would be helpful, but whenever I have a query, I am told to call back after 4pm. When I do call, I often feel rushed and asked to contact them again the following day because the centre closes shortly after 4pm”

What difference did this make?

This engagement provided valuable insight into what matters most to patients and has helped inform discussions with service leaders about priorities for improvement. Most importantly, it ensured that the experiences of Sickle Cell and Thalassaemia communities are visible, understood, and used to support the development of safer, more responsive, and more equitable services.

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 146 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.



Supporting a family

We heard from a mother who reported the distress caused by her daughter being allocated three different social workers in just four months.

This lack of continuity forced her to repeatedly revisit traumatic experiences of domestic abuse, increasing emotional harm and disrupting support. Her daughter also struggled to engage, finding it difficult to build trust with frequently changing professionals, which negatively impacted her wellbeing and access to help. Healthwatch Sandwell signposted to various organisations who could support:

- The Local Authority suggesting dedicated, trauma-informed social worker to provide consistent support.
- Voluntary sector organisation support with a referral to a specialist domestic abuse counsellor.
- Asking all services involved to have coordinated multi-agency approach to reduce duplication.



"Since having more consistent support in place, we finally feel listened to and understood. My daughter is beginning to open up and engage, and we feel more confident about the support around us."

Supporting visually impaired

A visually impaired resident reported multiple service failures across agencies, experiencing ongoing anti-social behaviour and harassment, leaving him feeling unsafe in his home, with no effective action taken.

Patient A reported poor communication with their Social Worker, including missed visits and no response to concerns. Their care package was reduced and then stopped, leaving them without support for daily needs. They were living in poor conditions, unable to safely prepare food, and relying on takeaways. With no current care support, unresolved benefit issues, and no update on safeguarding or their complaint. Healthwatch Sandwell signposted to the following services:

- Sandwell Adults Safeguarding Board for a safeguarding review.
- The Local Authority for a possible allocation of a new Social Worker to rebuild trust and improve communication.
- CAB for benefits support.
- Voluntary Sector Organisation for advocacy support.



"I feel like someone is finally listening and taking this seriously. Having support to push things forward has given me hope that my situation will improve and that I can feel safe and supported again."

Show casing the power of lived experiences

People with diverse needs played a key role in supporting our priority projects by volunteering their time and sharing their own lived experiences. Their honest feedback helped us better understand the challenges people face when accessing health and social care services. By listening to and valuing these contributions, we were able to highlight important issues and help drive improvements that better reflect the needs of the whole community.

This year, our volunteers:

- Proactively took part in our Midland Metropolitan University Hospital Wayfinder Project
- Supported report writing by helping to ensure that appropriate and respectful language was used for people with different disabilities.
- Carried out enter and view visits to local services to help them improve.



At the heart of what we do

During the year, we strengthened our approach to volunteer engagement by developing new and inclusive ways for people to contribute their expertise and insight.

We established the foundations for an Independent Experts Network (IEN), bringing together individuals who were specialists in their fields, drawing on both lived experience and professional knowledge. These volunteers came from local communities as well as provider and commissioner backgrounds. The network was designed to offer advice and guidance to our Independent Strategic Advisory Board (ISAB), while also supporting co-production across our work. Recruitment formed part of our refreshed work programme and updated communications approach.



In addition, we developed a Grass Roots Steering Group, made up of volunteers who shared valuable intelligence and insight to help inform organisational priorities. This group enabled broader and more inclusive participation in decision-making, providing a platform for voices that were not formally part of the ISAB, but were essential in shaping our direction.

Together, these initiatives expanded opportunities for meaningful volunteer involvement and ensured that a diverse range of perspectives informed our work.



Sandwell Deaf Community Association (SDCA)

Healthwatch Sandwell has worked with SDCA for several years to address health inequalities, promote reasonable adjustments, and improve digital access for people who are Deaf or hard of hearing.

Craig Potheary, SDCA's Wellbeing Coach and Advocate, supports individuals and families through advocacy, wellbeing initiatives, and access to services.

SDCA, a charity established in 2003, provides specialist support across Sandwell and the Black Country, promoting independence, inclusion, and wellbeing through advice, community support, and programmes for all age groups.

They have also supported Healthwatch in assessing access and signage at MMUH, with findings helping the Trust build a case for improvements.

At the heart of what we do

During the year, we strengthened our approach to volunteer engagement by developing new and inclusive ways for people to contribute their expertise and insight.

Sandra Troth, SVI Development Worker

Sandra has made a valuable contribution to Healthwatch Sandwell projects by drawing on her lived experience as a visually impaired person. Her first-hand insight has helped ensure that the voices of people with visual impairments are meaningfully represented and understood within the work.

Sandra has been able to highlight the real challenges individuals face when accessing health and social care services, such as difficulties with navigation, communication barriers, and the accessibility of information.



By sharing her experiences, she has helped shape project discussions and recommendations, ensuring that they are inclusive and practical.

Sandra has also supported the identification of gaps in services, particularly around accessible formats and the need for staff awareness and training.

Her perspective has encouraged a more person-centred approach, helping teams to consider how systems and environments can be adapted to better meet the needs of those with visual impairments.

Sandra has also helped arrange for a group of SVI members to attend the Midland Metropolitan Hospital to assess signage and access throughout the hospital in a project looking at access for those who have physical disabilities.



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.



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Finance and future priorities

We receive funding from **[your local authority]** under the Health and Social Care Act 2012 to help us do our work.

Our income and expenditure:

Income		Expenditure	
Annual grant from Government	£179,000	Expenditure on pay	£128,143
Additional income	£0	Non-pay expenditure	£24,396
		Office and management fee	£20,175
Total income	£179,000	Total Expenditure	£172,714

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. What people in Sandwell say about Mental Health Services.
2. Delivering small scale projects aligned with the Joint Health and Wellbeing Strategy priorities, including Preventable Premature Mortality, Mental Health, and Obesity.
3. The Enter and View programme a focus on Local Authority Extra Care facilities, alongside ongoing engagement with residents and staff following each report.
4. Engage with people with learning disabilities to understand their experiences and gather feedback on the support services they use.

Statutory statements

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.

For example, in our local authority area, we take information to Sandwell Health and Wellbeing Board, Sandwell Adults Safeguarding Board, Sandwell Scrutiny Board, Sandwell Health and Care Partnership Board.

We also take insight and experiences to decision-makers in We also take insight and experiences to decision-makers in the Black Country Integrated Care System. For example, Healthwatch Sandwell work together with Healthwatch Walsall, Healthwatch Wolverhampton and Healthwatch Dudley by representing the Black Country at various meetings including Prevention and Personalization Strategic Forum, Transformation, BC Integrated Care Board, Quality and Oversight Committee, Involvement and Advisory Assurance Group.

Healthwatch representatives

Healthwatch Sandwell is represented on the Sandwell Health and Wellbeing Board by Amritpal Randhawa, ISAB Chair

During 2025/26, our representative has effectively carried out this role by by presenting our reports to raise the profile of the patient story which is valuable in supporting quality improvements at strategic and operational levels

Healthwatch Sandwell is represented on Black Country Integrated Care Partnerships by Alexia Farmer Healthwatch Sandwell Manager and Black Country Integrated Care Boards by Aileen Farrer Healthwatch Walsall Manager .

Statutory statements

Enter and view

Location	Reason for visit	What you did as a result
Tendercare Oldbury	Part of work plan agreed by the ISAB to look at dementia care homes.	Report written with 3 recommendations, provider commented all actions have completed.
Bartholemew Lodge	Part of work plan agreed by the ISAB to look at dementia care homes.	Report written with 4 recommendations, provider commented that an action plan was in progress.
MMUH Ward 9	Part of work plan agreed by the ISAB to look at dementia care homes.	Report written with 4 recommendations, provider commented that they will look at the recommendations and feed back post review.
The Poplars	Part of work plan agreed by the ISAB to look at dementia care homes.	Report written with 6 recommendations, provider commented happy with all the findings on they are working on the recommendations provided.
Dovedale Court	Part of work plan agreed by the ISAB to look at dementia care homes.	Report written with 5 recommendations, provider commented all recommendations are either completed or progress.
Way Finder Project.		<p>Reports written and shared with senior decision makers and those who contributed to the patient experiences.</p> <p>Recommendations and Report was taken to the Way Finder Steering Group.</p>



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