# **Healthwatch Newcastle Annual Report 2024-2025**

Unlocking the power of people-driven care

## **Contents**

1. An update from our chairs
2. About us
3. Our year in numbers
4. A year of making a difference
5. Making a difference in the community
6. Listening to your experiences
7. Hearing from all communities
8. Information and signposting
9. Showcasing volunteer impact
10. Our impact
11. Working together for change
12. Finance and future priorities
13. Statutory statements

“The feedback local Healthwatch hear in their communities and share with us at Healthwatch England is invaluable, building a picture of what it’s like to use health and care services nationwide. Local people’s experiences help us understand where we –and decision makers –must focus, and highlight issues that might otherwise go unnoticed. We can then make recommendations that will change care for the better, both locally and across the nation.”

**Louise Ansari, Chief Executive, Healthwatch England**

## **An update from our chairs**

**Over the last year, Healthwatch Newcastle has been hard at work responding to local priorities and collaborating across the wider Integrated Care Board (ICB) area, where Healthwatch are seen as vital partners.**

We have also connected with other local Healthwatch on topics of regional concern, while supporting the national agenda under Healthwatch England.

Our Annual Survey told us about Newcastle’s mixed experiences of dementia care, adult social care, emergency services, mental health, physiotherapy and NHS 111. It also reflected national concerns about GP access, dental services and community pharmacies. Meanwhile, our growing outreach and engagement strategy has improved our ability to reach all communities, informing our priorities for the current year.

We also welcomed several committee members who have brought new and diverse perspectives to our work. Details of our research, public engagement and the outcomes we have influenced are given throughout this report.

**Dr Terry Bearpark, Chair April-September 2024**

**Healthwatch Newcastle continue to provide a meaningful voice for the diverse communities who use the health and social care services of Newcastle, and to hold those services to account.**

Partnering with providers, commissioners and the voluntary sector allows us to ensure that the needs of all our communities are considered when decisions are made. This includes commissioning decisions made by the Integrated Care Board.

We also continue to work closely with Healthwatch England, providing local data and opinions to inform country-wide decisions, and make local residents aware of national issues.

We are grateful to all the Newcastle residents who have supported our research over the last year, and of course to Dr Terry Bearpark for her hard-working tenure as Chair of Healthwatch Newcastle.

**Michael Brown, Chair September 2024 – March 2025**

## **About us**

**Healthwatch Newcastle is your local health and social care champion.**

**We make sure that 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

We believe that users’ views can improve health and social care services.

### Our mission

To demonstrate how user views can improve services in health and social care, and provide practical services, support and advice.

### Our values are:

**Equity:** Including everyone. Embracing inclusivity and compassion, establishing profound connections with the communities we serve, and empowering them.

**Collaboration:** Partnering with care providers, government and the voluntary sector. Nurturing relationships, fostering transparent communication, and partnering to amplify our impact.

**Independence:** Listening to people and making sure their voices are heard. Championing the public's agenda, serving as purposeful and critical allies to decision-makers.

**Honesty:** We always speak the truth. Operating with unyielding integrity and honesty, fearlessly advocating truth to those in power.

**Impact:** Acting on feedback and driving change. Pursuing ambitious goals to effect meaningful change for individuals and communities while remaining accountable and holding others accountable.

## **Our year in numbers**

### Overview:

We’ve supported **8,022 people** to have their say and get information about their care.

Our work is supported by **16 volunteers** and we employ **7 staff**.

We’re funded by **Newcastle City Council**. In 2024/25 we received **£228,667,** which is the same as last year. The **Integrated Care Board** also provided **£9,500** for project work and core funds.

### Reaching out:

**1,215 people shared their experiences with us through research**, which is double the previous year. This allowed us to produce reports, raise awareness of issues and improve services.

**6,638 people** engaged with us at **192 outreach sessions and events**; this is 5 times the number of people we engaged withlast year.

**169 people came directly to us for information and signposting**, with over 90% coming to us with health-related topics.

### Championing your voice:

We published 1 report:

* *Covid 19 and Flu Vaccination Take Up by the Public* – March 2025

With a further 2 reports prepared for publishing:

* *What do we mean by a Mental Health Crisis?* - May 2025
* *Patient experiences of hospital discharge pathways 1-3 at the Newcastle upon Tyne Hospitals NHS Foundation Trust* - June 2025

## **A year of making a difference**

**Over the year we’ve been out and about in the community listening to your views, engaging with partners and working to improve care in Gateshead. Here are a few highlights.**

### Spring:

* We met with older people and people with disabilities at sites like Alan Shearer Activity Centre and Sherringham House, allowing them to lead conversations about their care.
* We held a discussion group at a local community hub, where we heard about challenges accessing local services and travelling to NHS health appointments.

### Summer:

* We held a discussion group at a local community hub, where we heard about challenges accessing local services and travelling to NHS health appointments.
* We held our Annual Joint Meeting with Healthwatch Gateshead in which the public and partners participated in defining our priorities for the coming year.

### Autum:

* We visited the Royal Victoria Infirmary, where we heard both positive stories and many reports of confusion about the hospital discharge process.
* We travelled to the Healthwatch England National Conference to participate in national conversations about health and social care.

### Winter:

* We delivered workshops on the NHS 10-year plan, both online and across the city, giving the people of Newcastle the chance to have their say in the future of the NHS.
* We received twice as many responses to our annual survey compared to the previous one, receiving feedback from almost 300 people to inform our future work.

## **Making a difference in the community**

**We take people’s experiences to healthcare professionals and decision-makers. In this way your feedback can shape services and improve care over time.**

Here are some examples of our work in Newcastle this year:

### Working with hospital staff to support the public

**Information-sharing between hospitals and patients is vital when it comes to positive health outcomes.**

That’s why we have continued to build on our connection with the Newcastle Upon Tyne Hospitals NHS Foundation Trust. Through regular visits, we have engaged with over 2,000 people across the Royal Victoria Infirmary and Freeman Hospital, whose views continue to inform our projects around hospital discharge, mental health crisis response and health literacy.

### Signposting students in their new area

**Students, especially young students, often face challenges navigating unfamiliar local health systems.**

We spoke to students and presented an information session at Northumbria University. This allowed us to hear their concerns, introduce them to our signposting system and provide information about health and social care services in Newcastle.

### Facilitating Reasonable Adjustments

**Patients attending GP services in Newcastle told us that they were struggling to access appointments without support.**

We developed a survey for patients with learning disabilities and autistic patients, including an Easy Read version. We asked about their awareness of Reasonable Adjustments, the types of adjustments they needed and the process for requesting them. 79 people responded, sharing challenges relating to communication, access and physical environments. We are analysing these results and considering the best path forward.

## **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.

### Establishing new connections with local communities

**We continue to build upon our new engagement strategy introduced last year, including our latest regular drop-in session at Galafield Family Hub.**

By connecting with Action for Children and their partner services, we identified Galafield Family hub as an ideal location to engage with young families, and added it to our list of regular drop-in events.

**What did we do?**

Attended 13 regular drop-in locations, each advertised via our websites, newsletter, social media, and paper flyers. Our drop-ins ensure that we have a presence in communities across Newcastle and that we are accessible to people who are digitally excluded from online information.

We continue to receive positive feedback on our drop-in sessions from both host organisations and attendees, a sign that we are building trust and relationships in many local communities.

**Top themes we heard about this year:**

* Dentistry
* GP surgeries and doctors
* Hospital inpatient and outpatient experiences

### Examining local public uptake of Covid-19 and seasonal Flu vaccines

**Healthwatch Newcastle was approached by the North East and North Cumbria Integrated Care Board (NENC ICB).**

They wanted to understand why uptake of the annual vaccination programme was 18% lower than in previous years, and to evaluate the effectiveness of their “Be Wise Immunise” public awareness campaign.

**Key things we heard:**

* 52% of respondents had received both seasonal vaccines.
* 24% of respondents had received either the Covid-19 vaccine or the Flu vaccine.
* 24% of respondents had received neither of the two seasonal vaccines.

41% of respondents had seen the “Be Wise Immunise” slogan. Out of these, one respondent indicated that they considered booking a vaccination appointment as a result of seeing the slogan. All others indicated that seeing it did not influence their decision one way or the other.

**What difference did this make?**

The NENC ICB received the results of this survey. As a result, the public views featured in the report will be taken into account when drafting their winter readiness plans for 2025-26.

## **Hearing from all communities**

**We’re here for all residents of Newcastle. 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 experiences and play a part in shaping services to meet their needs.

**This year, we have reached different communities by:**

* Establishing a regular presence at new hubs, community groups and activity centres.
* Attending events like Northern Pride and Newcastle Mela.
* Reaching out to young people through Youthwatch Newcastle.

### Creating opportunities for young people to speak up

**We recently launched a new Youthwatch Newcastle programme, partnering with Youth Focus NE to host a pilot workshop on Mental Health & Wellbeing.**

So far, we have heard that our local young people have a positive relationship with their youth groups and youth workers. However, they also report a wide ranging lack of support for neurodivergent young people in Newcastle.

**What difference did this make?**

Young people, especially young people with Special Educational Needs & Disabilities (SEND) often feel disengaged and disempowered when it comes to their health and social care. Through our Youthwatch Newcastle programme, we aim to ensure that their views are reflected in our ongoing work, and continue to reach out to new partners to identify further opportunities to engage with local young people.

### Listening to diverse groups at Northern Pride

**We engaged with attendees at Northern Pride in the Health & Wellbeing Zone at the Newcastle Civic Centre, providing signposting information and inviting them to share their perspectives.**

Attendees told us about a wide range of topics, from LGBTQIA+ health and social care to neurodiversity and antenatal care.

**Key things we heard:**

* “One size doesn’t fit all – people need individualised care.”
* “LGBTQ+ people and charities should be consulted more in decision-making.”
* “There should be better resources, information and services available to people turning 18.”
* “Better awareness around mental health and neurodiversity.”

## **Information and signposting**

**Whether it’s finding an NHS dentist, making a complaint, or choosing a good care home for a loved one – you can count on our support.**

This year 169 people have reached out to us for advice, support or help finding services.

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.

### Case Study: Asian elders activities

**Lily\* spoke to us at a drop-in event, seeking activities for Asian elders to support her parent’s health and wellbeing.**

There was nothing that Lily was able to find in the east of Newcastle. Fortunately, Healthwatch Newcastle is present at several community centres used by members of Newcastle’s Asian communities, so we were able to make connections and direct Lily’s parent to appropriate sources of local support groups and social care.

**\*this name has been changed.**

### Navigating a difficult complaints process

**Andrea\* approached Healthwatch Newcastle, telling us that her husband had been misdiagnosed with cancer and seeking support in raising a complaint about his care.**

She felt that her husband’s care had been mismanaged and was looking for advice about the complaints process. Andrea was also looking for an advocate to support her in navigating this process. We connected her to the Independent Complaints Advocacy and Connected Voice Advocacy services. She thanked us, saying she now had what she needed to continue.

**\*this name has been changed.**

## **Showcasing volunteer impact**

**We’re supported by our amazing volunteers, and thanks to their efforts in the community and on our committee, we’re able to understand what is working and what needs improving when it comes to health and social care in Newcastle.**

We are supported by two types of volunteer roles:

* Committee Members
* Engagement Volunteers

This section outlines the importance of each role, and how they have contributed to our impacts this year.

### At the heart of what we do

**By improving our volunteer offer, we successfully increased our committee from 5 members to 8, bringing new expertise and diverse perspectives to our work.**

The Healthwatch Newcastle Committee is made up of volunteer members, each representing their own community of geography, interest, demographic or practice, and each with their own personal/professional interest in health and social care services.

This year they have helped us to:

* Set the research priorities for the coming year.
* Define our research projects.
* Identify engagement activities and locations, defining how we listen to the public and their experiences.
* Identify underrepresented communities in Newcastle, and support us in reaching out to them to hear their views.
* Provide direction and support for the annual work programme.
* Fulfil our statutory duties e.g. responding to Quality Accounts.

Our Engagement Volunteers are individuals who support the work programme of Healthwatch Newcastle and have helped us this year to:

* Visit communities to promote Healthwatch Newcastle, raising awareness of our research projects and what we have to offer.
* Support with stalls at events such as Newcastle Mela, sharing information about health and social care.
* Collect experiences and support their local communities to share their views, helping people respond to our surveys and submit feedback.

In the coming year we plan to further develop our volunteer offer, diversifying our range of volunteering roles, enriching the volunteer experience and maxmising their impact within Healthwatch Newcastle.

**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.

[www.healthwatchnewcastle.org.uk](http://www.healthwatchnewcastle.org.uk)

0808 178 9282

info@healthwatchnewcastle.org.uk

## **Our impact**

### Improving the ambulance experience for wheelchair users in the North East

**Healthwatch Newcastle listens to local people and understands that it’s not always easy for them to tell services directly what needs to change.**

After receiving anonymous feedback from the public, Healthwatch Newcastle raised concerns with the North East Ambulance Service (NEAS) about the accessibility of ambulances for people with a wheelchair.

NEAS responded positively and began consulting with:

* The network of 14 regional Healthwatch groups
* Sunderland Disability Group
* Disability North
* Newcastle RREMS (Regional Rehabilitation Engineering Mobility Service)

This collaboration led to the introduction of new NEAS service guidance.

**What changed?**

* **Treatment in Wheelchairs:** Where possible, NEAS will treat people while they remain in their wheelchairs if it’s safe and gives the best outcome.
* **Staying at Home:** If appropriate, NEAS will treat people at home and refer them to other services instead of taking them to hospital.
* **Transporting Wheelchairs:** If someone is in a community setting and needs to go to hospital, NEAS will use Patient Transport Services or an ambulance to convey them. If the wheelchair can’t go with them, it will be transported separately. All local hospitals have agreed to this new approach.

NEAS are still making improvements, and their next steps are:

* Develop an internal training video to raise awareness of the challenges some wheelchair users can face.
* Staff training on how to safely disengage wheelchair motors.
* NEAS is working with Newcastle Wheelchair Services and has draft training materials ready. Training will begin once these are finalised.

This work shows how Healthwatch Newcastle helped ensure that the voices of service users were heard—and led to real, positive changes in how services are delivered.

"Working with Healthwatch Newcastle and other voluntary sector partners has helped us better understand the needs of wheelchair users and improve the way we provide services.

This has allowed us to ensure people are treat with dignity, we are able to meet their specific needs and protects people’s wheelchairs from being left in community settings.”

**Mark Johns, Engagement, Diversity & Inclusion Manager**

### Helping the safeguarding board improve the way they gather feedback

 **Getting feedback can be challenging for safeguarding teams, especially when trying to hear from people who have experienced the safeguarding process — such as adults at risk and their families or friends.**

We asked Newcastle Safeguarding Adults Board to think about how and when people are involved in giving feedback in their own safeguarding journey. This includes individuals and families going through the Section 42\* safeguarding process.

Originally, the Newcastle Safeguarding Adults Board collected feedback through a single survey at the end of the process. However, the final decisions and outcomes often shaped how people felt about the entire experience. This made some individuals less likely to share their views.

Healthwatch Newcastle noticed this issue and recognised how the timing of the feedback survey was affecting the responses and raised it with the Co-ordinator of the Newcastle Safeguarding Adults Board. We discussed this issue and worked with them to review the feedback options.

*\*Section 42 of the Care Act 2014 applies where a local authority has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there) (a) has needs for care and support (whether or not the authority is meeting any of those needs), (b) is experiencing, or is at risk of, abuse or neglect, and (c)a s a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.*

**What changed?**

The changes meant that more people were happy to share their experiences. Over 200 people gave feedback this year to the Multi-Agency Safeguarding Hub (MASH) team — more than ever before in the last 10 years!

Now, the Newcastle Safeguarding Adults Board is staring to check feedback at different points during the safeguarding journey — not just at the end.

The Newcastle Safeguarding Adults Board have made and are continuing to make changes because of our conversations. For example, a new question was added to the online referral form. This form is for family, friends or neighbours who are worried about someone.

"The insights from Healthwatch Newcastle have been invaluable in developing this new approach to gathering feedback from our service users and it has gone really well so far.”

**Clare Nixon, Newcastle Safeguarding Adults Board Coordinator**

## **Working together for change**

**Healthwatch Newcastle is proud to part of the Healthwatch North East and North Cumbria (NENC) regional network.**

The goal for Healthwatch NENC is to make sure people's experiences with health and care services are heard at the Integrated Care System (ICS) level and help influence decisions made about health and care services.

### A collaborative network of local Healthwatch:

**Building a Strong Healthwatch Network**

We formed a network of 14 local Healthwatch groups to improve health and care services both regionally and nationally. Funding from our Integrated Care Board helped us build strong, meaningful relationships within this network, consistently adding value to the design of health and care services.

We have representatives from our network on local and regional strategic boards. These boards have robust reporting structures that support coordinated and effective engagement with our communities.

Our collaborative approach is recognised nationally as best practice.

### Work carried out during 2024 - 2025:

**Integrated Care Strategy**

As a network, we received over 400 responses during our engagement period.

A review of the feedback showed that children and young people were under-represented.

**Impact:**

The Integrated Care Board (ICB) added a fourth goal: **"Giving children and young people the best start in life."** This goal increases the focus on peopleof all ages throughout the strategy.

### Refreshing the ICB Involvement Strategy

Healthwatch spoke with over 100 people to help update the ICB Involvement Strategy.

**Impact:**

Based on their feedback, the ICB has updated its principles to include:

* Meaningful involvement
* Removing barriers
* Listening to feedback

We also helped create a shorter, easier-to-read document and a workplan based on these new principles, including ways to measure success.

### Access to dental care

**Listening to People's Dental Care Challenges**

Over 3,800 people shared their views with us.

As a network, we engaged with people across the region to understand the difficulties they face in accessing dental services. We used various methods, including surveys, mystery shopping, general conversations, and one-on-one interviews at Darlington Urgent Dental Access Centre (UDAC).

***The ICB has provided the following response:***

Improving access to dentistry will not be a quick fix but we are working on it, our key focus areas are;

* Stabilising services - additional investment including incentivised access, additional dental out of hours treatment capacity and dental clinical assessment workforce/triage capacity.
* Funding available to deliver a new model of dental care via Urgent Dental
* Access Centres and provide additional general dental access.
* Working with ‘at risk’ practices to identify and address financial issues of delivering NHS dental care.
* Working with local dental networks and NHS England North East Workforce Training and Education Directorate to improve recruitment, retention, training and education across the region.
* Developing an oral health strategy to improve oral health and reduce the pressure on dentistry.

We are continuing to work closely with the ICB as new ways of working are developed.

### The big conversation: Women’s Health

**Listening to Women's Health Needs**

As a network, we spoke to nearly 4,500 people and held six focus groups with women who face extra health challenges. We wanted to understand what matters most to them and their priorities.

**What We Learned:**

* Mental health and wellbeing
* Healthy ageing and long-term conditions (like bone, joint, and muscle health)
* Menopause, perimenopause, and hormone replacement therapy
* Screening services (like cervical, breast, bowel, and cancer screenings)
* Menstrual and gynaecological health

**Impact:**

We're now working with our partners to create a "Woman’s Promise." This will help women, health professionals, and others understand and support women's health needs and rights.

### Change NHS:

As a network, we supported engagement for the NHS 10 Year Strategy, delivering over 17 workshops throughout North East & North Cumbria including people from ethnically marginalised communities, autistic people, people with learning disabilities and young people.

*“Our commitment to working in partnership with Healthwatch and being open and transparent in our interactions will continue. We value greatly the contribution of the partnership across the region. We should all be rightly proud of what we have achieved to date, and I look forward to seeing this work progress as we enter the next phase of the ICB.”*

**Sam Allen, Chief Executive at North East and North Cumbria ICB**

### North East Ambulance Service clinical strategy:

**Gathering Feedback to Improve NEAS Services**

Over 1,700 people shared their valuable feedback. 12 Healthwatch groups in the North East, along with VONNE, engaged with the public and patients as part of the NEAS clinical strategy review. This work will be ongoing throughout 2025-2026.

**Key Strengths:**

* Compassionate and professional staff
* Community involvement
* Patient Transport Services
* Effective emergency care

Areas for Improvement:

* Response times
* Mental health support
* Communication transparency
* Resource and staffing limitation
* Coordination with other services

### Raising Voices Together:

To showcase the work carried out by the NENC Healthwatch network, all 14 local Healthwatch came together. We shared experiences and learning, highlighting how local engagement has made an impact both regionally and nationally.

This gathering helped strengthen relationships, with a commitment to continue collaborative efforts. Claire Riley, Chief Corporate Services Officer, emphasized that our efforts have ensured that citizen voices are embedded within the ICB at every level of decision-making. She stressed the importance of involving and engaging with communities in any changes and developments. Claire also highlighted the need for consistent, long-term funding to build on our success and ensure people's voices are heard and acted upon.

Chris McCann, Deputy CEO of Healthwatch England, supported Claire's views on the power of the network. He expressed the ambition for Healthwatch nationally to develop strong systems of work, using NENC Healthwatch as a model for best practice.

## **Finance and future priorities**

Healthwatch Newcastle receive funding from Newcastle City Council under the Health and Social Care Act 2012 to help us do our work.

### Our income and expenditure:

Income:

* Newcastle City Council £228,668
* Integrated Care Board £9,500
* **Total income: £238,168**

Expenditure:

* Expenditure on pay £191,281
* Non-pay expenditure £2,122
* Office and management fee £91,479
* **Total Expenditure £284,882**

Tell Us North CIC (host organisation for Healthwatch Newcastle) have agreed to spend reserve monies to increase the capacity of the Healthwatch Gateshead staff team. This is in the form of additional roles, Research and Data Officer and Enter and View Officer to support the development of the Healthwatch Gateshead Services. This money from Tell Us North CIC covers the difference between income and expenditure on the table above.

### Next steps:

**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 work together with partners and our local Integrated Care System to help develop a culture where, at every level, staff strive to listen and learn from patients to make care better.

Healthwatch Newcastle have now trained authorised representatives dedicated to Enter and View, so we will be carrying out Enter and View visits in 2025-26.

**Our emerging** priorities for the next year are:

* Hospitals
* Mental Health
* NHS 111 service
* Social Care

## **Statutory statements**

**Healthwatch Newcastle is administered by Tell Us North CIC Address: Milburn House, Suite E11, Dean Street, Newcastle Upon Tyne, NE1 1LE**

**Company Number: 10394966**

**Email: info@tellusnorth.org.uk Healthwatch Newcastle uses the**

**Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.**

### The way we work

**Involvement of volunteers and lay people in our governance and decision-making.**

The Tell Us North board consists of 5 Directors who work on a voluntary basis to provide direction, oversight and scrutiny of our activities across all our contracts including Healthwatch Newcastle. Healthwatch Newcastle also has its own volunteer committee, consisting of 8 members. This committee ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2024/25, the Tell Us North CIC Board met 4 times as the legal entity. While the Healthwatch Newcastle Committee met 6 times, making decisions on matters such as making responses on the local Quality Accounts, defining research projects and identifying underrepresented communities who we could target to hear more from them about their experiences of the health and social care service.

We ensure wider public involvement in deciding our work priorities. Our committee bi-monthly meetings and the Annual Joint Meeting between Healthwatch Newcastle and Healthwatch Gateshead (held in September) are open to the public, and the minutes for each meeting are made available on our website.

### Methods and systems used across the year to obtain people’s experiences

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services.

During 2024/25, we have been accessible to the public in a number of ways, including phone, email, via web form on our website, social media and in-person at regular community groups and forum meetings.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will provide copies to partner organisations, make print copies available and publish it on our website: [www.healthwatchnewcastle.org.uk](http://www.healthwatchnewcastle.org.uk)

### Responses to recommendations

This year there were no issues or recommendations escalated by us to the Healthwatch England Committee, so there were no resulting reviews or investigations. We undertook no Enter and View Visits.

### Taking people’s experiences to decision-makers

We ensure that people who can make decisions about services hear about the insights and experiences that have been shared with us.

We have taken insights and experiences to decision-makers in North East and North Cumbria including the Care Quality Commission, Newcastle upon Tyne Hospitals NHS Foundation Trust, Newcastle Adult Social Care and Integrated Care Board (ICB). We also share our data with Healthwatch England to help address health and care issues at a national level.

### Healthwatch representatives

Healthwatch Newcastle is represented by Yvonne Probert, CEO of Tell Us North CIC, or Michael Brown, Chair of the Healthwatch Newcastle Committee on:

* Newcastle Health and Wellbeing Board
* Newcastle Adults Safeguarding Board
* Newcastle City Council Health and Social Care Scrutiny Committee
* Integrated Care Board (ICB) Newcastle Place Sub-Committee