
# Healthwatch Listening Tour 2025/26: Summary Report

Published: September 2026

healthwatch
East Sussex

# Contents





healthwatch East Sussex

# Executive Summary

This Listening Tour summary report brings together the feedback from our engagement in Rother and Eastbourne between August 2025 and April 2026.

The *Introduction* sets out our approach to our Tours and the different methods we used to engage individuals.

The report draws out the differences and common themes in the areas we visited, making six recommendations around the following themes:

**Accessing primary care:** There is a need to look at how "you and your GP" guidelines are being followed

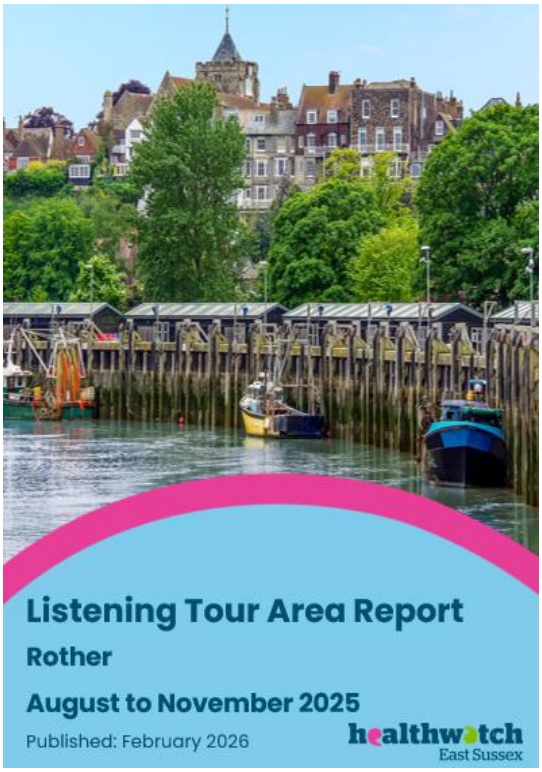
**Communication:** There is a need to improve communication between different NHS and adult social care services.

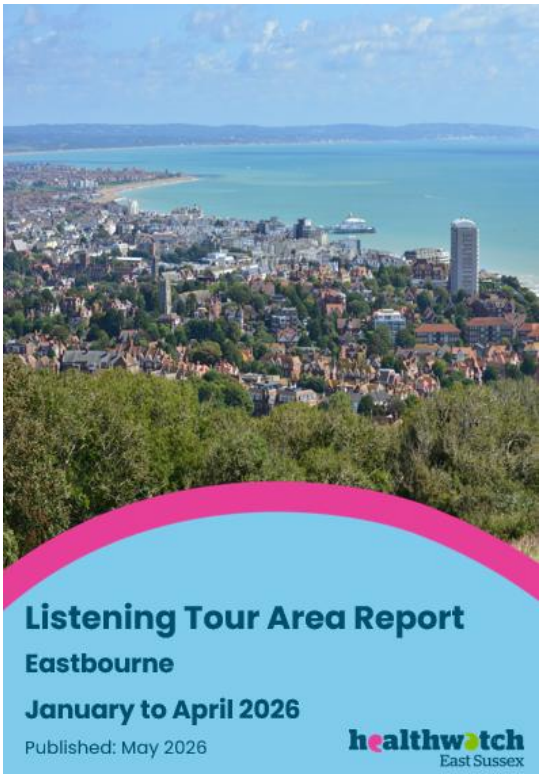
**Mental health and neurodiversity:** How those on waiting lists for mental health support or neurodiversity assessment are communicated with should be reviewed.

There is a need for healthcare services to look at how their service could be made more accessible for people who have a mental health need or who are neurodivergent.

**Community and social groups:** Information about activities, groups and clubs could be made more available.

**Changes to services:** There is a need to consider how patient and public voice will be gathered and listened to in the future.



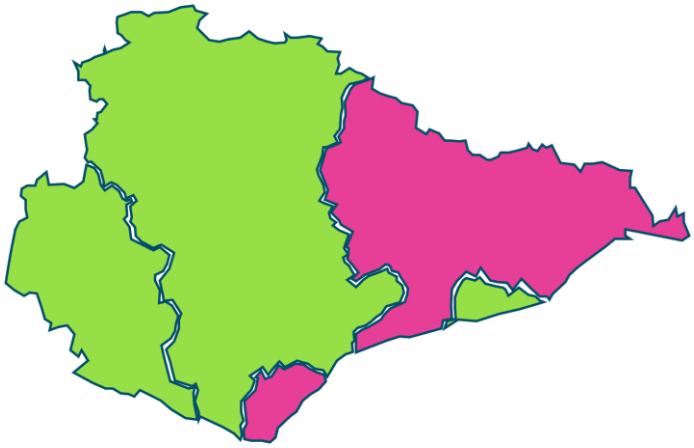
# Introduction

Healthwatch East Sussex has previously undertaken an annual Listening Tour to a single part of East Sussex to listen to local people on their experiences of health and care. In 2024/25 we adapted our approach to the Listening Tour and visited three areas to increase our reach and understand the priorities of a range of local communities. In 2025/26, we continued this updated approach, visiting the final two districts and boroughs in East Sussex.

Our Listening Tour used a variety of activities to hear people's experiences of accessing and using health and care services. This included surveys, discussion groups, in person activities and listening events. We use the feedback received to make recommendations to health and care partners to support positive changes to local services. This report relates to what we heard in our Listening Tours in Rother and Eastbourne during 2025/26.

Through our Listening Tours in these areas, we engaged with a total of **268** individuals.

- **180** individuals shared their views through in person engagement
- **53** shared their views through our Information and Signposting service
- **35** shared their views via our online survey



We visited a range of local groups, which included:

**Rother:**

Amaze parent and carer group, Bexhill foodbank, Battle foodbank, Staplecross lunch club.

**Eastbourne:**

Matthew 25 Mission, Amaze parent and carer group, groups hosted by Compass Arts, Eastbourne Age Concern Shed.

**Listening Tour Events:**

Listening Tour events were also held in each of these areas during the tour.

**Other feedback:**

Alongside in person activities, we also drew on feedback from our online Listening Tour survey, as well as feedback shared with our Information and Signposting service.

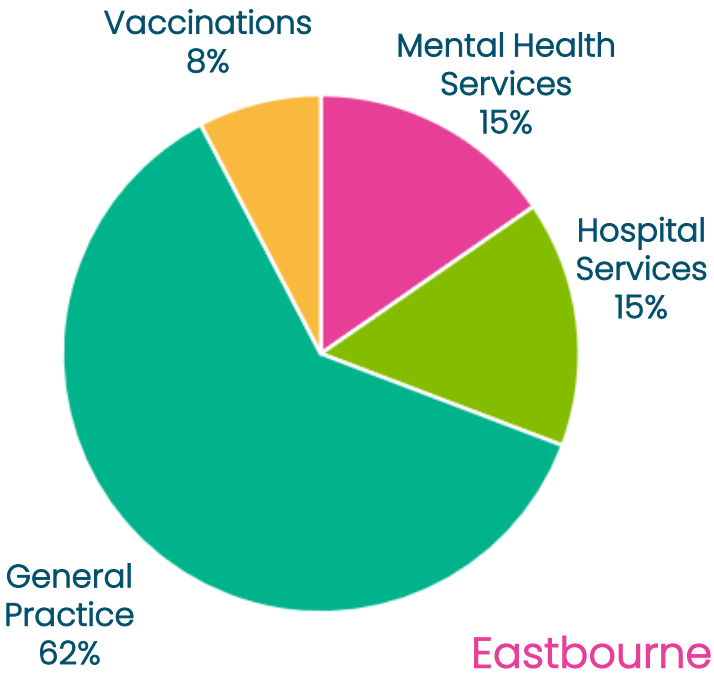
# Feedback Centre and Information & Signposting

Healthwatch East Sussex offers an online Feedback Centre, allowing people in East Sussex to leave feedback about their experiences of health and care services. We also offer an Information and Signposting (I&S) service, which provides information to support people to navigate the health and care sector.

## Rother

During our listening tour timeframe, we received **13** enquiries and pieces of feedback through our I&S service and Feedback Centre.

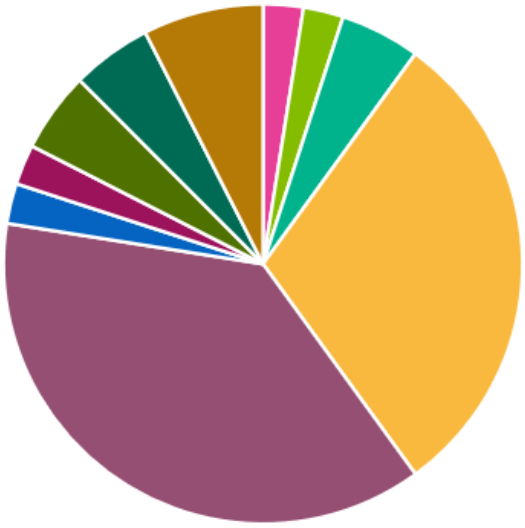
We were contacted about a range of services including GP services, hospital services, mental health services and vaccination services.




## Eastbourne

During our listening tour timeframe, we received **40** enquiries and pieces of feedback through our I&S service and Feedback Centre.

We were contacted about a range of services including GP services, hospital services, dentistry, pharmacy, patient transport, wheelchair services and mental health services, among others. (See key below)



### Eastbourne enquiries key:

**Orange** – Hospital services (30%)
**Mauve** – General practice (37%)
**Blue** – NHS 111 (3%)
**Purple** – Patient transport (3%)
**Dark green** – Pharmacy (5%)
**Teal** – Wheelchair services (5%)
**Mustard** – "Other" (8%)
**Pink** – Mental health services (2%)
**Green** – Ambulances (2%)
**Turquoise** – Dentistry (5%)

# Differences between Rother and Eastbourne

Throughout our Listening Tours, people shared a wide range of experiences on their local health and care services. Some of these themes were only mentioned in one area, with these area-specific themes outlined below:

- In Rother, we heard that multiple GP practices across the district were considering moving to a new location, or closing a satellite site. These proposed changes have the potential to impact how far patients have to travel to visit their GP practice. At the time of writing, none of the proposed movements or closures we heard about during our tour have come into effect.

- Those living in more rural parts of Rother often have to travel long distances to get to their nearest pharmacy, with this issue exacerbated in some cases during weekends and holidays, when opening hours can vary.

- In Eastbourne, people shared concerns about the amount of messaging telling people to avoid A&E if they can as it is very busy, as it was felt that this messaging can make people avoid A&E even when they have a genuine need.

- Parents in Rother highlighted the lack of a treatment pathway for children and young people with Avoidant Restrictive Food Intake Disorder (ARFID). Many parents shared that their children had received no support, while other shared that while they had been given some limited support, this had not helped. NHS Surrey and Sussex have since begun to look a treatment pathway for people with ARFID.

- In Eastbourne, we heard about how people from both within and outside Sussex are travelling to Beachy Head to attempt to take their own lives, and the efforts being made by both statutory and voluntary organisations to support individuals coming to the area for this reason. Suggestions including having clearer signage near the cliff edges which display local and national support service information were also made.

# Differences between Rother and Eastbourne

- The use of online methods for contacting healthcare services, including GP practices, can make accessing support more challenging for people in Rother who live in areas where broadband and mobile coverage is more limited.

- In Eastbourne, people shared difficulties accessing audiology services, sharing that often phone calls to the service were left unanswered, and patients didn't receive a callback when this occurred.


- In Rother, individuals shared how people working in the countryside (such as farmers) are expected to travel to healthcare services, which can be quite a distance from where they live and work. This may prevent people from seeking support for their health and wellbeing when they need it. Those attending our Rother Listening Tour workshop highlighted the need for services to build better connections and information sharing mechanisms with people working in rural occupations.

- Those attending our Eastbourne Listening Tour workshop felt that it would be useful to have a walk in GP service in the area that had no registered patients, in order to reduce attendance rates at A&E and help people to be seen quicker. A walk in GP service located in Eastbourne train station did exist, however this closed a few years ago and so far does not seem to have been replaced.

Although these issues were mentioned in one area during our activity, this does not necessarily mean that this issue only affects that one area. However, it remains important to highlight that while lots of issues are relevant across East Sussex, some may be more important to and more impactful on those living in specific areas.

# Common Themes

## Accessing Primary Care

Similarly to our previous Listening Tours in other parts of East Sussex, access to GP services was one of the most common themes discussed during our Listening Tours in Rother and Eastbourne. People shared a range of issues related to accessing GP appointments, including difficultly using online digital tools, challenges around telephone appointments, and a lack of appointments at GP practices, including a lack of appointments outside school or working hours.

### Digital tools

Many GP practices use a range of digital tools, such as Engage Consult, to enable people to book appointments. While these methods are helpful for some, for others these can make accessing GP services more challenging compared to telephone or face-to-face alternatives.

Through our Tours, we heard about the wide range of people who can be digitally excluded. Although it was felt that there is an assumption that that only older adults have difficulty using digital methods, other groups who can find digital methods more challenging include those with sensory needs and disabilities, those with mental health needs, and people on low incomes.

Although the introduction of the "You and Your GP" guidance requires all GP practices to be accessible via digital, face-to-face and telephone methods between 8am – 6:30pm, feedback during our Tours, as well as our mapping of all GP practices in East Sussex indicated that many practices are not accessible via all of these methods. Since our Listening Tours, we have continued to hear from people from across East Sussex who have shared they are not able to access their GP practice via all the above methods. This has included people sharing that they feel they are being "pushed" to use digital methods to contact their GP practice.

### Telephone contact

We continued to hear how people feel they are forced to ring their GP practice at 8am to get an appointment, and the issues this can cause. Working age people shared difficulties in booking appointments this way, as they are often commuting or already at work during this time and so are unable to call their GP practice.

# Common Themes

### Telephone appointments (continued)

Similarly, telephone appointments can be challenging as people are often not given a time for their appointment and may be at school, work or another public setting when they receive their call. This can mean that people have to talk about private healthcare information in public or sometimes will miss the appointment, which has negative consequences both for the individual and the NHS.
Alongside this, those with mental health needs can also struggle to answer phone calls, particularly when they don't know when their phone will ring or who it will be, which again can result in missed appointments.

### Difficulties accessing appointments

Limited availability of GP appointments is something we hear regularly, both through our Listening Tours and our wider work. Throughout our Tours people reported struggling to access appointments at their GP practice due to all the appointments for the day getting filled very quickly. As we heard in Eastbourne, the inability to get support from a primary healthcare setting (such as a GP practice) can result in people attending emergency departments to receive care, which can put strain on these services.
Challenges can still arise for those who are able to access a GP appointment. Being unable to choose the time of your appointment can create issues for people of all ages due to other commitments which can make attending appointments more difficult. This can again result in people missing their appointments which could have been given to someone else.

## Communication

Through our Tours we heard about instances of poor communication, both between different healthcare services and directly to patients, which can cause confusion and frustration, and leave patients waiting a long time to access services without knowing when they will be seen.

### Listening to patients

While some of those we spoke to during our Tours shared positive experiences of interacting with staff and the good care and support they received, others shared more negative stories. As part of our Listening Tour survey, some individuals reported that they "never" felt listened to when accessing health and care services, while during our

# Common Themes

## Communication

### Listening to patients (continued)

in-person engagement, people shared specific examples of instances where they felt they were being ignored or not taken seriously by healthcare professionals, leaving them (or a family member) without the care and support they needed.

### Wait times and referrals

We heard examples where poor communication with patients meant they were unsure of the status of their referral to services, including how long the wait time for the service was and in some cases if they had been referred to a different service in the first place. Some people reported they or a family member had been on a waiting list for years without any communication about the status of their referral or how much longer they could expect to wait, with this being a particular issue for people waiting for ADHD or Autism assessments, or mental health services. Others reported being surprised to hear from a service, either because they were not aware they had been referred or because they had been waiting so long they had forgotten about the referral.

### Language

The language that services and professionals use to communicate with patients and the public is very important. Through our Eastbourne Listening Tour, we heard about how being referred to by your preferred name was valuable, particularly for people who identified as non-binary or transgender in helping them to feel recognised and included in health and care environments.

The importance of communicating in a clear and simple way was discussed at both of our Listening Tour Workshops. Jargon and acronyms can be difficult for patients and the public to understand, which can then cause issues if people don't understand their care or diagnosis. Additionally, confusing language can make it more challenging for different services (both statutory and voluntary) to work together effectively due to different levels of understand of what something means.

# What we heard: Quotes

*"GP appointments can be a lottery needing several attempts even to get into the queue for a telephone appointment"*
*Eastbourne*

*"From my own experience this year, NHS 111 doesn't seem very joined up to other services."*
*Rother*

*"Better communication to understand CAMHS pathways is very much needed"*
*Rother*

*"When I request a doctors appointment I have already explored all areas I can to elevate my problem. Why then do I constantly feel like I am a nuisance?"*
*Rother*

*"I feel like people use 111 because they don't want to go to their GP or to A&E, but that's pretty much where [NHS 111] always sends you anyway"*
*Eastbourne*

*"A&E staff at Eastbourne District Hospital were kind and helpful despite pressure"*
*Eastbourne*

# Common Themes

## Communication

### Joined up communication

Many of those we spoke to shared that they did not feel that services were "joined up" or communicating effectively with one another. Through our survey, people reported that they often must repeat their story when they are seen by different professionals or parts of the system. Many shared examples of poor communication between services causing issues with some examples including: people being directed to services that weren't available or unable to help with the individuals healthcare need; people getting referred to services without any information about that service or its wait time; and poor communication between services resulting in delays to individuals' care and support.
Our feedback about a lack of joined up communication spanned a wide variety of primary and secondary care services, highlighting the need to ensure all services work together and communicate more effectively to improve outcomes for patients.

## Mental health and neurodiversity

Accessing support for mental health needs or neurodiversity (including assessments) can be challenging, with those we spoke to sharing stories of very long wait times and time limited support. We also heard about some of the challenges people who are neurodivergent or who have a mental health need can experience when accessing other health and care services.

### Wait times

As previously mentioned, long waiting times can be a real issue for people attempting to access mental health support and assessments for ADHD or Autism. These long wait times are felt both in adult services, and services for children and young people, with some people sharing the limited amount of support available to those on the waiting list for a diagnosis or other support. We heard that some people have been waiting for years for a ADHD or Autism assessment, without a timeframe of when to expect to be seen. Similarly, we heard of long wait times for mental health support such as talking therapies, with some reporting waiting months for support after an initial assessment. These wait times can cause stress, frustration, and a feeling of being ignored by services.

# Common Themes

## Mental health and neurodiversity

### Time limited support

Good mental health support is vital in helping people with a mental health need to have a better quality of life. Although we heard positive feedback about how mental health services have helped people, many also shared that support is often time limited, meaning people only receive a set amount of sessions/hours of support before they are discharged. People also shared that they have been turned down for support as they had accessed the same mental health service previously.
While time limited support can be necessary to ensure services can better meet demand, people shared with us that being discharged or being unable to re-access a service can lead to them feeling they have been "dumped" by services and left to find further support alone.
Private mental health support can be expensive, and there is often only so much support VCSE organisation can provide, with some organisations highlighting that they felt they are left to "hold" individuals when services are no longer able to support them.

### Accessing other services

Accessing health and care services can be more challenging for those who are neurodivergent or who have a mental health need. Through our Tours we heard about the difficulty of accessing services, for example A&E, due to loud and busy waiting areas which can be overstimulating and stressful, particularly when you are in pain or unwell. Accessing and attending appointments can also be challenging, with making or answering telephone calls and not knowing who you are going to see also being commonly raised challenges. These aspects can all result in people avoiding accessing services or missing appointments, which can have negative consequences for the individual and the NHS.


Accommodations such as having a quieter waiting area for those who need it, having a variety of ways to book appointments, and telling people who they will be seeing ahead of their appointment are all things that can help to make services more accessible.

# Common Themes

## Community and social groups

Throughout our Tours people spoke about the importance of community and social groups in supporting them to maintain their health and wellbeing. These groups offer people the opportunity to connect with others socially, get out of the house, and remain active. Having a wide variety of social groups, clubs and activities for different ages and interests is important in helping to reduce social isolation, loneliness and helps to make people feel like a part of their community.
However, we heard that finding the right activity or group can be difficult, with some people being unsure of where to go to find activities and groups near them. Although directories can be useful, having information about a range of activities (which could be free or paid for) in a range of different places can make it easier for people to come across this information, rather than relying on everyone finding their way to one specific website or booklet.

## Changes to services

Our Tours coincided with announcements about changes that may impact health and care services including:

- The publication of the NHS 10 Year Plan,
- The announcement of the merger of Sussex Integrated Care Board (ICB) and Surrey Heartlands ICB,
- The beginning of the local election period,
- Ongoing discussions around local government reorganisation

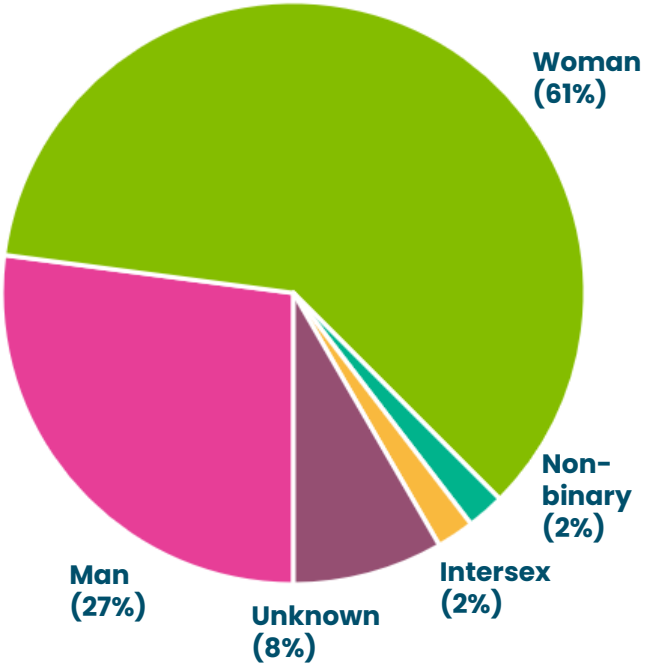
All these changes are likely to impact people's access to and experiences of health and care services. Services themselves continue to change, as we heard in Rother regarding GP practices moving premises or potentially closing satellite sites.
As health and care services evolve over time, it is vital that any changes consider the needs of patients and the public and are clearly communicated both to the public and patients, as well as the statutory and VCSE organisations that changes may impact on.
To do this, decision makers should ensure clear, simple mechanisms are in place to allow the public, patients and those working in VCSE or statutory organisations to feedback their experiences and views on changes. Decision makers should ensure they listen to these views and experiences with the aims of making health and care services as effective and accessible as possible, and minimising any potential negative impacts of change on the public, patients, and services.

# Listening Tour Demographics

As part of our Listening Tour activity, we ask individuals to share their demographic information with us, to enable us to have a better understanding of what groups we are engaging with. In total, 48 people shared their demographic information with us. An analysis of this information is shown below.

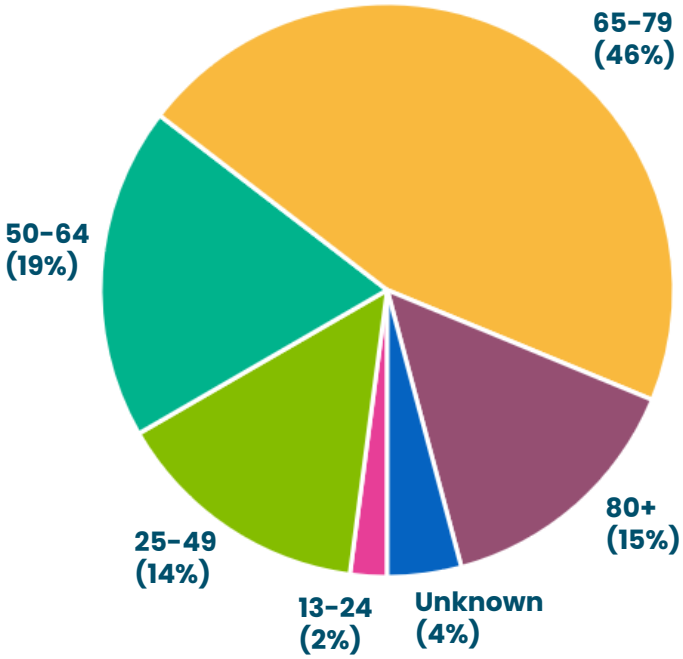
### Gender:

61% of those we spoke to during our tours were women



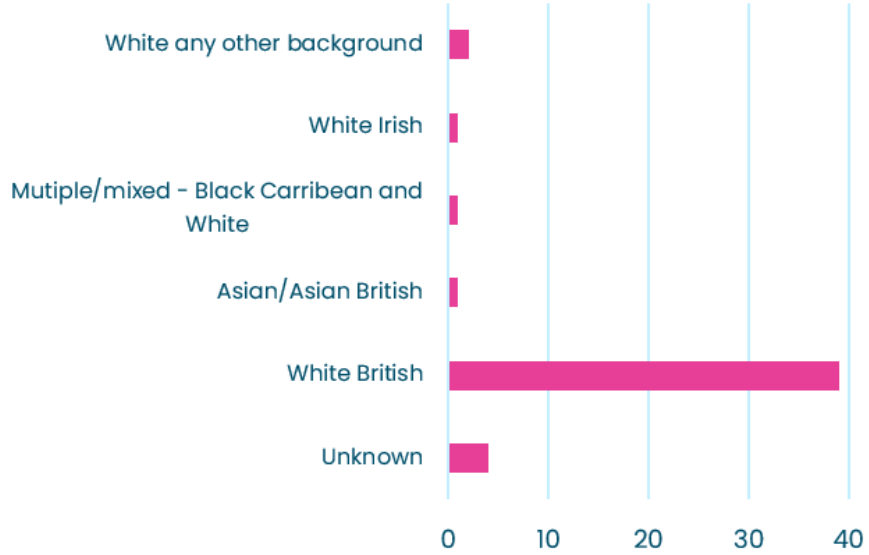

### Age:

48% of those we spoke to were between 65-79 years old




### Ethnicity :

The majority of those surveyed identified as White British




These figures are drawn from the 48 people who shared their demographic information through in person activities or our online survey.

# Listening Tour 2025/26 Recommendations

1. **Accessing primary care**: In line with "You and Your GP" guidance, Primary Care Networks and NHS Surrey and Sussex should support GP practices to implement this guidance where it is not currently being followed to improve patient access, including by ensuring all GP practices allow patients to contact them through a variety of methods.

2. **Communication:** NHS Surrey and Sussex and East Sussex County Council should look at ways to improve communication between different NHS and adult social care services to improve patient experience and navigation. In particular, information around different services opening times, wait times, and what conditions and needs they can support should be regularly shared with services that refer or signpost to others.

3. **Mental health and neurodiversity:** Sussex Partnership Foundation Trust should put in place systems which ensure that those on the waiting list for ADHD or autism assessments, and mental health support are communicated with regularly regarding their place on the waiting list and how long they can expect to wait. What support could be offered for people on long waiting lists should also be considered.

4. **Mental health and neurodiversity:** All healthcare services should consider how to make their services more accessible for people who are neurodivergent or who have mental health needs, for example through offering quieter waiting areas for those who need this.

5. **Community and social groups:** East Sussex County Council and District and Borough councils should aim to make information about activities, groups and clubs available in a variety of locations and formats, to ensure people can find out about activities near them.

6. **Changes to services:** East Sussex County Council and NHS Surrey and Sussex should ensure that the public, patients and those working in statutory and VCSE organisations are engaged regarding changes to services. They should also consider how patient voice will be collected following the abolition of Healthwatch which is expected in 2027.

# Future of the Healthwatch Listening Tour

## Future of the Healthwatch Listening Tour

Following the announcement in 2025 proposing the abolition of Healthwatch England and local Healthwatch, we have taken the decision not to undertake any further Listening Tours in 2026-27. Instead, we aim to undertake more targeted engagement with groups that we tend to hear from less frequently, such as men and members of the LGBTQIA+ community.

This targeted engagement will sit alongside our general engagement activities and Healthwatch projects, which we undertake across East Sussex throughout the year.

We will continue to share the views and experiences we heard though our Listening Tours with services and decision makers, and will continue to undertake engagement in all the districts and boroughs of East Sussex, to ensure we hear the experiences of as wide a range of people as possible.

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