

Healthwatch Tower Hamlets Stakeholder Survey Report



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Introduction

In April 2025, we shared an online Stakeholder Perception Survey with 137 industry professionals. Of those contacted, 9 stakeholders responded, giving us a response rate of 15%, which is an increase from last year's response rate of 10%.

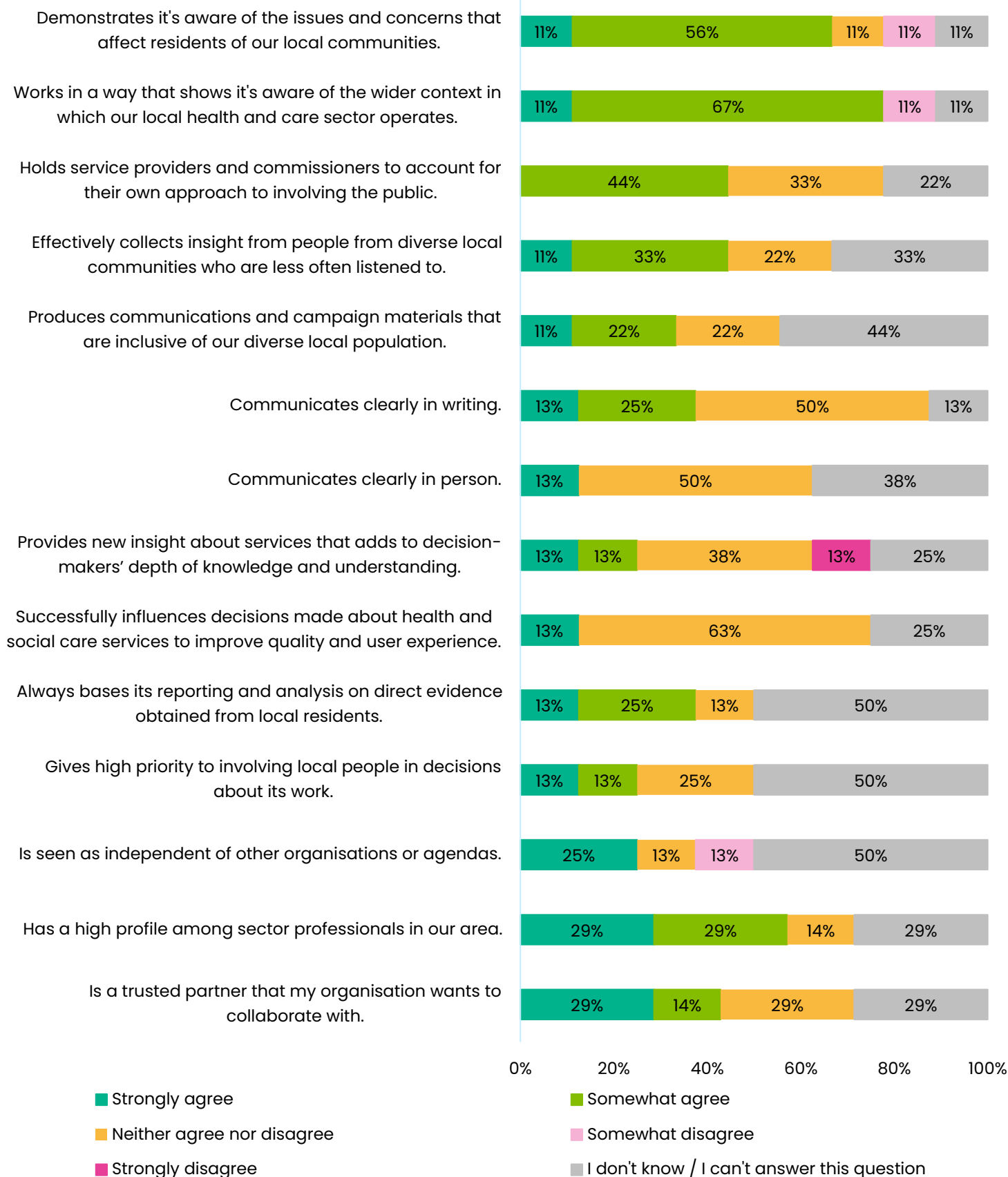
The aim of this survey was to gather honest, constructive feedback from our key stakeholders. Their insights help us understand where Healthwatch Tower Hamlets is performing well and where there is room for improvement, ultimately supporting us to better serve local residents.

The survey explored several key areas: how well Healthwatch Tower Hamlets addresses issues affecting local people, the effectiveness of our communication and engagement with stakeholders, and which health and care topics they believe we should prioritise.

This report summarises the results and outlines how we plan to act on the feedback received.

Survey Results

Stakeholder Ratings of Specific Service Aspects



Respondent Representation

The 9 stakeholders who responded to the survey represented a range of sectors, with most coming from health and community-based organisations.

Breakdown of Respondents by Sector

Sector	Number of Respondents
Health Service Provider	4
Third/Voluntary/Community Sector	3
Local Authority (Public Health)	1
Other	1

Four respondents chose to share both the name of their organisation and their role within it, while the remaining participants preferred to remain anonymous, selecting only the general sector they belonged to.

There was no apparent relationship between whether a respondent chose to disclose their organisation and whether they provided comments or additional feedback throughout the survey.

Perceptions of Healthwatch's Awareness of Issues Affecting Communities in Tower Hamlets and the Wider Context

As shown on page 4, most respondents agreed that Healthwatch Tower Hamlets is aware of the concerns of local communities and the wider health and care context. However, there was a slight increase in neutral or "don't know" responses when stakeholders were asked whether Healthwatch is effective in holding service providers to account.

Among those who provided additional comments about all these topics, several indicated they would like more information about Healthwatch Tower Hamlets'. One stakeholder expressed:

"I have some issues with the visibility of the organisation at the grassroots level. There is less of a sense of Healthwatch being proactive in engaging with partners to share skills and contribute to common strands of work."

This feedback suggests that, while general awareness is seen positively by most, there may be a perceived gap in our visibility and active engagement.

Reach to Diverse Communities in the Borough and Inclusivity of Campaign Materials

Aside from neutral responses, a portion of stakeholders generally agreed that Healthwatch Tower Hamlets is reaching marginalised communities, gathering their insights, and producing inclusive communications for the borough's diverse population.

Two stakeholders noted that they were unable to assess this area due to limited exposure to Healthwatch's materials. One respondent commented:

"The insights and reports that I have read seem too formulaic and lacking in depth. This feels like Healthwatch are following a nationally prescribed template and the visibility of local voices is not always in evidence. Where there are quotes from patients, these tend to be soundbites and there is seldom nuance or complexity reflected, which in my experience is almost always the case, with aspects of an experience or interaction being positive but with other aspects being open to improvement."

This feedback may reflect how Healthwatch's campaign materials are perceived in terms of the visibility of local voices. This has been considered in our response, which is outlined in Section 4 of this report.

Communication Clarity, Insights given to and influence on decision makers in Health and Social Care Services

The majority of stakeholders responded neutrally or were unsure about Healthwatch Tower Hamlets' communication with stakeholders and the extent to which it provides insights to decision makers to improve their understanding of local residents' concerns. Similarly, responses were mixed regarding Healthwatch's perceived influence on decision makers to improve services based on resident feedback.

One stakeholder specifically noted a lack of communication and expressed interest in learning more about Healthwatch's work in this area – highlighting a potential opportunity for improvement.

Resident Involvement in Tower Hamlets Work, Evidence Gathering, and Organisational Independence

The majority of respondents agreed that Healthwatch Tower Hamlets' reporting and analysis are evidence-based and reflect input from local residents. Opinions were evenly split between neutral and agreement regarding the involvement of

local communities in decision-making within Healthwatch's work. Most respondents also agreed that Healthwatch Tower Hamlets operates independently of other organisations; however, one stakeholder disagreed and stated:

"It often feels like the areas that Healthwatch focus on are decided by Public Health rather than being a bottom up process where local people decide what they feel should be looked at in depth"

View of Healthwatch Tower Hamlets by Organisations

Most respondents agreed that Healthwatch Tower Hamlets maintains a high profile among sector professionals. While opinions on Healthwatch as a trusted collaborator were more evenly spread—with many neutral responses—a larger proportion still expressed agreement.

Stakeholder Priorities and Recommendations for Community Outreach

At the end of the survey, stakeholders were asked to suggest priority areas for health and social care service provision, as well as communities that are often marginalised and require improved outreach in 2025. Below is a summary of their suggestions:

- Families with children who have additional needs
- Older Jewish, Somali, Vietnamese, and Chinese residents, as well as housebound people with disabilities
- Children and young people with mental health needs, those identifying as LGBTQIA+, and those not attending school
- Older adults who are housebound and socially isolated, including long-term users of services like LinkAge Plus, and low-income adults aged 50–64 facing increasing health and mobility challenges
- Visually impaired individuals and ethnic minority residents with limited English proficiency

Response to Stakeholder Feedback

Matthew Adrien, Service Director for Healthwatch Tower Hamlets response to stakeholder suggestions made in the survey.

"I have some issues with the visibility of the organisation at the grassroots level. There is less of a sense of Healthwatch being proactive in engaging with partners to share skills and contribute to common strands of work."

We regularly attend local community events and fairs around the borough and complete weekly visits to health and social care organisations as part of our patient experience program which aims to gain the views of local people at grassroots level.

We also work with partner organisations regularly and we highlight some of these interactions and engagements within our Healthwatch Tower Hamlets Annual Report. However, we recognise that improvements could be made in this area, so will look at ways to make our work with partners more visible to the community in the future.

Healthwatch Tower Hamlets is a small team, so it can be challenging at times to engage with all partners and contribute to common strands of work in the way we would like to.

"The insights and reports that I have read seem too formulaic and lacking in depth. This feels like Healthwatch are following a nationally prescribed template and the visibility of local voices is not always in evidence. Where there are quotes from patients, these tend to be soundbites and there is seldom nuance or complexity reflected, which in my experience is almost always the case, with aspects of an experience or interaction being positive but with other aspects being open to improvement."

Our Healthwatch branding represents more than just a logo or templates. The way we communicate, write, and present ourselves informs people about our values and how we can support them.

Our reports are produced and presented in a way that makes it easy for all members of the local community to read, and we try to produce reports in plain

English language as a large portion of the local population speak English as their second language.

When we provide quotes from patients in our reports, positive and negative comments can be highlighted, so we can show transparency, and provide a fair and balanced view of patients' feedback to partners and stakeholders.

"It often feels like the areas that Healthwatch focus on are decided by Public Health rather than being a bottom up process where local people decide what they feel should be looked at in depth"

Healthwatch Tower Hamlets do not focus our work on areas decided by Public Health or any other health and social care organisation.

We do ask partners and stakeholders, like Public Health, to share their views and suggestions on topic areas we could be focus our work on each year (including comments received from our stakeholder perception survey).

Each year, we publish an online survey for local people so they can have their say on which priority areas we should focus our work on each year.

We also have a local advisory committee which is made up of local residents who have the final say on which areas of work we should focus on each year. The local advisory committee will take into account suggestions from partners, stakeholders and residents (via the online survey results), as well as any data or insights we have collected from the previous year.

One of the research topics that we will be working on during 2025/26, originally came as a suggestion from a stakeholder via our stakeholder perception survey for this year. This shows that our focus isn't reliant on Public Health.



healthwatch

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