

Hearing every voice

Assessing the accessibility of the NHS complaints process and feedback mechanisms in Surrey

June 2026



"I don't really want to keep escalating. I just want engagement and being deflected incorrectly by PALS is immensely depressing and immensely reinforcing of the mounting belief that the NHS and all associated bodies have no interest in supporting those in need."



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Executive summary

The NHS 10 year plan includes a shift from analogue to digital, reforms to the NHS complaints process and plans to change accountability for the functions of Healthwatch England and local Healthwatch. These changes will all affect how people experience complaints and feedback processes within the NHS.

Between April 2025 and April 2026, 85 people contacted Healthwatch Surrey about requesting reasonable adjustments or accessible information from an NHS service¹. While the specific topics covered in people's experiences varied between the individuals concerned, one theme was consistent; they had all experienced challenges when trying to raise a concern, share feedback or submit a complaint with the NHS.

Taken together, these factors prompted us to review how accessible the NHS complaints and feedback mechanisms are in Surrey and if there is anything that can reduce barriers for people who have additional needs in being able to have their voices heard by NHS providers

In addition to reviewing the enquiries we have received via our Helpdesk, we reviewed experiences shared with us during community engagement. Healthwatch Surrey volunteers also supported this review with research into the complaint's pages of the websites of some primary and secondary care providers. This provided a perspective on the accessibility of the information available to the public.

We found that the main challenges faced by people with additional needs when giving feedback or making a complaint are:

1. **Navigating the system of feedback, complaints and queries about care.** Knowing how to complain, understanding the outcome of a complaint, and how to escalate it to the Parliamentary and Health

¹ 85 enquiries were recorded by Healthwatch Surrey via our Information and Advice service in 2025–26. We also collected an additional 11 experiences via the Independent Health Complaints Advocacy Service. During this time we did not actively seek people's experiences explicitly about this subject.

Service Ombudsman (PHSO) were particular challenges. Navigating digital platforms to give feedback, submit a complaint or access information and advice was another. We also found that in order to get the appropriate care they need, many people with additional needs feel they need to raise a complaint in order to get appropriate medical care.

- 2. Complaining directly to the provider.** This is a particular challenge for people wanting to complain about their GP practice. However, we also found that people faced challenges in understanding the role of the Patient Advice and Liaison Service (PALS) and had concerns about raising a complaint or feeding back directly to other providers.

We have included actionable recommendations to reduce the barriers that are experienced by people with additional needs when submitting a complaint about NHS services or providing feedback. These include reviewing websites and digital information leaflets to ensure they are easy to read and understand and are accessible to screen readers.

We also recommend making sure that all staff who are patient facing are made aware of the NHS complaints process and where to signpost people to get support in submitting a formal complaint.

Methodology

To ensure that patient voice and local people were involved in this project we took a two step approach to our review. In the first stage we collated the experiences that had been shared with us between April 2025 and April 2026 that related to accessibility of complaints or people with additional needs trying to raise a concern with an NHS provider. From these experiences we were able to identify barriers experienced by people with additional needs to access NHS complaints and feedback mechanisms.

The second part of our review included looking at websites for a selection of GP practices and hospitals across Surrey. We used elements of the Web Content Accessibility Guidance (WCAG) and the Accessible Information Standard (AIS) to inform this review. Many of our volunteers who supported

us with the reviews have lived experience of having an additional need themselves, or providing care and support to someone with additional needs.

For this report we have used the term 'additional needs'. We have used this term to describe a person who requires extra support to be able to access services. This includes but is not limited to people who are dyslexic, neurodivergent or experience speech, language or communication difficulties.

Please note that the terminology used in this report reflects the language of the participants and may not align with the terminology typically used by Healthwatch Surrey.

Findings

1. Navigating the system: feedback, complaints and care

Navigating the NHS can be challenging for anyone accessing services but particularly for those who have additional needs. From the experiences shared and desk based research we identified some key themes, such as:

- Knowing how to submit a formal complaint
- Understanding and processing the outcome of a complaint
- Navigating digital platforms and information
- Lack of knowledge about the correct pathways to raise concerns about access to care.

Knowing how to submit a formal complaint

Between April 2025 and April 2026 96 people enquired about submitting a complaint about an NHS service. 57 out of the 96 enquiries were from people who identified as having an additional need including a disability.

One of the questions we are regularly asked is how to submit a formal complaint. People are often unsure how to begin the complaints process, or they have so far found it challenging to effectively communicate with the provider about their complaint:

“I have already started the complaint, but because I am unable to communicate by email, I am struggling to navigate the process and would like some support in doing so.”

2311112, 50-64, neurodivergent

“I called up [the provider] to complain and a few minutes into the call an automated voice said I had used my allotted time and the line went dead. I phoned back and left a message saying that if they did not call me back, I would contact the newspapers and my MP. They called me back in the end, but I am still not sure if my formal complaint has been logged.”

231241, 80–89, physical/mobility impairment, long-term condition

“I have been very brief as I find the complaints procedure rather obscure and I am not sure what I can do or even who to contact.”

230695, 65–79, physical/mobility impairment**Understanding and processing the outcome of a complaint**

People with additional needs (such as a neurodivergent condition, or a sensory impairment) have told us they need support to understand the outcome of their complaint and to escalate it to the PHSO:

“I have submitted a complaint with [the provider] and have now received my complaint response. However, I am autistic and struggle to process information. The complaints team agreed to meet with me to go through my complaint response. However, this kept getting pushed back and they have now said that they won’t be able to do it.”

230843, 25–49, long-term health condition and neurodivergent

“I have received my complaint response and want to submit it to the PHSO. However, I am unable to see my supporting documents since losing my eyesight. I have an NHS appointed advocate for one hour a week to help with admin, but need her to help me prep for my appointments.”

231570, 50–65, sensory impairment, physical/mobility impairment and long-term health condition

Although both people cited above had active complaints with NHS providers in Surrey, neither were made aware of the Independent Health Complaints Advocacy service until they had made contact with Healthwatch Surrey. If they were made aware of the service from the start of the complaint, they would have been supported through the process and in understanding the outcome of their complaint and escalating it to the PHSO if necessary.

People's experiences of NHS complaints would likely be improved if complaint responses were made more accessible to meet the needs of the person who has submitted a complaint.

The NHS [Fit for the future: 10 Year Health Plan for England](#) plan includes ambitions to use AI tools to collect more complaints data and respond more quickly. While the timeliness of complaint responses is important (especially if the person wishes to escalate their complaint to the PHSO²) it is equally important that complaints are dealt with in a sympathetic and collaborative manner, and that the provider keeps in regular communication with the complainant in regard to the process.

Recommendations:

- Ask about any reasonable adjustments that someone may need when they first submit their formal complaint and ensure any required adjustments are implemented throughout the NHS complaints process

Navigating digital platforms and information

As the shift from analogue to digital progresses, it is important that the accessibility of any digital platforms is considered and steps are taken to ensure that those who want to access digital services can, without excluding those who cannot or choose not to.

We have heard from Surrey residents with additional needs that they have experienced barriers when trying to access services online. These barriers are either because of the accessibility of a website or app, or because they are physically struggling to access technology. In these cases, they would benefit from more support or guidance.

² The PSHO will only investigate complaints that have been through the providers complaints process and that are taken to them within 12 months of the complaint being submitted, unless there are exceptional circumstances, at which point it is at their discretion.

“I have problems as a blind person in accessing public services, including the NHS. Especially as it is all moving towards digital.”

230875, 65–79, sensory impairment and physical/mobility impairment

“I am frightened about what is going to happen in the future because of the changes to PIP (Personal Independence Payments) and other disability benefits, so I have decided not to get a computer or internet because I am worried about money, which is impacting on my ability to access services.”

230829, 25–49, mental health and long-term health condition

All NHS providers are recommended by the Government’s accessibility community to follow the Web Content Accessibility Guidelines (WCAG). These guidelines exist to make digital content more accessible for a wide range of people. Under the WCAG, all public sector providers need to provide an accessibility statement outlining anything on their website which may be inaccessible and their commitment to resolving any accessibility issues. Using the accessibility statements, and our volunteer reviews, we found the following themes across the websites for NHS services in Surrey:

- Inaccessibility of PDFs
- Issues navigating website pages.

Inaccessibility of PDFs

The accessibility of PDFs was mentioned in most of the accessibility statements on NHS trusts’ websites, as older PDFs or PDFs that have not been created correctly are inaccessible for people who use screen readers. Under the WCAG, PDFs and other documents that were published before 23 September 2018 are not covered by accessibility regulations.

Three trusts had PDF documents available online which gave information and advice on how to make a complaint or raise a concern. However, two of the PDF’s were tri-fold leaflets designed to be printed. We found that these leaflets were difficult for people who were neurodivergent to engage

with as they are often busy and crowded and it is not obvious how the leaflet should be read when not folded. We also found that tri-fold leaflets were not accessible for people who use screen readers:

“My screen reader starts on the left-hand column of the leaflet, and it also starts part of the way down the page. I suspect that it has been put in a text box, which makes it difficult to navigate using a screen reader. Not all the images on the leaflet are Alt texted, so I don’t know what the images show.”

Document reviewed by provider May 2024

“For some reason my screen reader thinks the leaflet is in Arabic. This can sometimes happen when certain heading styles are used within a document. The screen reader also starts with the central column, not at the start of the document.”

Document reviewed by provider April 2024

The third PDF we reviewed was arranged as a standard document. However, the PDF had lots of images in the background which did not have Alt text, and the text was put over the images. When trying to navigate the document using a screen reader, it would say that each page of the 12 page document was an ‘Unlabelled graphic’.

“I don’t think my screen reader is picking up any of the text. I have heard the heading of the document, but everything else is ‘unlabelled graphic’.”

Document reviewed by provider April 2020 and updated April 2024

Issues navigating website pages

During our reviews of provider websites our volunteers found that the navigation of webpages (being able to find the relevant feedback, complaints and PALS webpages from the home page) varied greatly.

“To find the PALS webpage you need to click on patient and visitors, then information, advice and support and then you can click on the PALS webpage. It’s not that easy if you’re not

IT competent. It's not obvious how to find the page, even if you are IT competent. To access the feedback page you need to search in the search bar. I don't think you would be able to find it by looking at the front page. You would just have to guess where it may be."

Website reviewed by Healthwatch Surrey volunteers, April 2026

"It's not easy to find the complaints section, I had to look under several places within the 'contact us' section. It was the same for PALS."

Website reviewed by Healthwatch Surrey volunteers, April 2026

Our volunteers also found that when they did use the search bar available on the website, the PALS, complaints and feedback pages were low down in the search results.

"When I tried to find a page relating to feedback, I had to type it in to the search bar. When the search results came up patient feedback was the 7th result in the list, below various staff feedback streams. It comes across that staff feedback is considered more important than patient feedback."

Website reviewed by Healthwatch Surrey volunteers reviewed, April 2026

Through our review, we also became aware of challenges that people may experience when trying to navigate a singular page on a website to find the relevant information. This was particularly challenging for people who use screen readers or need to access easy read information.

"I use a screen reader but the drop downs on the complaints page which contain the information are not labelled. When the screen reader announces them it says, 'Unlabelled button zero', so you don't know which section you are accessing."

Website reviewed by Healthwatch Surrey volunteers, April 2026

“The drop downs on the PALS website are registering as a heading, not a button or a link. If I use the command to treat it like a button, which is what it should be registered as, it takes you to the top of the page. This is really disorientating, because you lose where you are on the page, so now I need to go back and read through the page again.

The sections are not even labelled as a link; it’s labelled as a heading. If the user treats it as a link then they will be able to open the drop down and access the information. It should be registered as a link so other screen readers know how to access the information.”

Website reviewed by Healthwatch Surrey volunteer, April 2026

“They have Easy Read, but I think if you actually required this, you would need support to get to the information.”

Website reviewed by Healthwatch Surrey volunteer, April 2026

It is also important to highlight that the person who conducted the reviews of the websites using a screen reader had a professional version of their screen reader software and had received training on how to use it. A member of the public using a different screen reader and/or without training may not be able to navigate the websites in the same way.

While we did find some inaccessible websites during our reviews, we also found a good example of website accessibility for someone who uses a screen reader.

“The website uses a breadcrumb trail, which is so useful to have as someone who uses a screen reader. Although they also use drop downs, they are all registered as they should be and labelled, so I know what I am accessing and the command that I need to use to access it.”

Website reviewed by Healthwatch Surrey volunteer, April 2026

During our reviews, we also found that one trust had used an external service to gather patient feedback about their service, which they could not confirm was fully accessible.

Under the current WCAG 2.2, public bodies, such as the NHS are not responsible for the accessibility of “third party content that’s under someone else’s control if you did not pay for it or develop it yourself”. However, providers should still consider the accessibility of any content they choose to include.

The NHS 10-year plan includes a ‘bricks to clicks’ approach to reforming the NHS, with a focus on using digital platforms to “Allow patients to leave feedback on the care they have received – compiled and communicated back to providers, clinical teams and professionals in easy to action formats.”.

It is important that those who require more support to access digital services are able to get the support they need for their specific access requirements.

The Government also outline that they are planning to continue the partnership with libraries and community groups, to help get people set up on the NHS App. However, there is no mention of additional support for people who require specialist training or support in using assistive technology such as screen reader software.

With the NHS moving from ‘bricks to clicks’ it is essential that digital platforms are accessible for everyone. However, this not only means ensuring the websites or apps themselves are accessible, but also ensuring that there is access to assistive technologies and training on how to use them, for the people who require IT.

Lack of knowledge about the correct pathways to raise concerns about access to care

Across the year lots of people spoke to us about how to raise a complaint pertaining to accessing the care they require from NHS services.

In particular, we found that people were submitting complaints when they were really looking to challenge a decision made about Continuing Healthcare (CHC). The confusion about how to challenge the outcome of a CHC assessment not only leads to frustration from the person who is challenging, it also means the complaints team within the Integrated Care Board (ICB) are spending time responding to complaints which should have been submitted as appeals.

People who have a rare or complex health condition were also submitting complaints because of not being able to access the care they require. However, submitting a complaint is not the most appropriate way to have their concerns addressed.

As a result, they submit a formal complaint, which does not always produce the outcomes they want and leads to frustration. However, if clear information on how to access care and how to raise concerns were available, people would be able to follow the correct process for their desired outcome.

Recommendation:

- Ensure that all resources, both internally created or externally sourced are accurate, up to date and as accessible as possible.

2. Complaining directly to providers

Under the current NHS complaints process you are encouraged to submit a complaint directly to the provider. However, we found that people were often concerned about doing this. This was especially true when the complaint or feedback related to their GP practice. We also found that there is still confusion over the role of the PALS and what they can and can't support with. Lastly, we found that people who have additional needs were concerned about having their care negatively impacted or removed completely as a direct result of giving feedback or complaining about the care they received.

Feedback and complaining about GP services

People who have additional needs have told us that they find it challenging to give feedback or to complain to their GP practice. People found they were given incorrect information about submitting a complaint, did not feel their concerns were appropriately addressed and did not receive a complaint response within a reasonable time frame.

“When I indicated yesterday that I would like to submit a complaint there was no information given to me. This is not in line with the NHS complaints policy. The person I spoke to is actually the practice reception manager. They just directed me to the online form and did not give me any information about where to get support with submitting a formal complaint.”

230942, 24-49, long-term health condition and mental health condition

“When I asked to escalate my concerns they said there was no lead GP or practice manager. I just don't know what to do.”

230741, 50-64, long-term health condition

“I brought up the issues I experienced recently when I had my smear test, but they were quite dismissive and didn’t take my concerns seriously.”

230829, 25-49, long-term health condition and mental health

“I am writing to complain about repeated failures and delays by a variety of clinicians at my local practice to diagnose my cancer for over three months. I am [in 20’s]-, and I have [a cancer diagnosis]...Since complaining to the practice, and the ICB getting involved, they have been unable to elicit a response from the GP practice, or the hospital -this is unacceptable in terms of professional standards, clinical care and patient safety.”

230773, 18-24, long-term health condition

People were left feeling distressed and frustrated when they didn’t receive a response that acknowledged their concerns or didn’t receive one in a reasonable time frame. Additionally, the delays that are caused by complaint responses being submitted later than specified in the NHS complaints guidance or providers’ own complaints policy has a knock on effect to the time the person then has to escalate their complaint to the PHSO.

As highlighted by the experiences above, frontline staff within GP practices were not always aware of the NHS complaints process and/or did not provide signposting to support and information about submitting a complaint. We have also heard from people who have consulted their GP practice website for information on how to submit a complaint, and come away confused:

“I wanted to complain to my GP about the mental health support I have received from them. However, when I checked the website the only details I found was your details [Healthwatch Surrey], or the ICB’s website, which was no longer active.”

231652, 25-49, mental health condition

“I want to make a complaint about the lack of care my daughter has received from our GP practice. I thought I was contacting the surgery directly when I emailed you because your [Healthwatch Surrey] contact details were on their complaints page.”

231677,25-49, neurodiversity

As part of our volunteer reviews of GP practices websites and complaints policies we found inconsistencies about how to submit a complaint or feedback, and incorrect information and signposting.

“In the practice’s patient facing complaints policy and information they include details of advocacy services. However, they don’t give details for the current Independent Health Complaints Advocacy Service. It does include information for Healthwatch, POhWER, The Advocacy People, Age UK and local councils. However, the current provider of the Independent Health Complaints Advocacy service is listed on their complaints page. This may be confusing if someone was to check the complaints policy as well as the website.”

Complaints policy reviewed by Healthwatch Surrey volunteers, April 2026

“If you click on their complaint form, it brings up their online services page, the same one you use to request an appointment or repeat prescription. I assume it would be under the ‘I have an admin or routine care request’, however, this is not clear and there is no specific mention of complaints or feedback on the form.”

Website reviewed by Healthwatch Surrey volunteers, April 2026

“You use the same form for both feedback and complaints or you are directed to Healthwatch Surrey or a weblink that doesn’t work for the Independent Health Complaints Advocacy Service.”

Website reviewed by Healthwatch Surrey volunteers, April 2026

We have also found through our reviews of primary care complaints that communication options were limited and that the information provided was not always clear or easy to follow:

“When submitting a complaint using the form you will have to explicitly say that you are submitting a formal complaint, or it may be mistaken as feedback.”

Website reviewed by Healthwatch Surrey volunteers, April 2026

“The practice offers telephone, text or email – but when I read on, it was all the contact information for the Independent Health Complaints Advocacy Service, not the practice. It’s confusing– there is one section for ‘feedback, compliments and complaints’, which has the online form and information for advocacy support. Then there is another section on the website called ‘Suggestions, comments and complaints’, which gives the practice’s number and email address for the practice manager.”

Website reviewed by Healthwatch Surrey volunteer, April 2026

This would cause frustration and confusion anyone who is trying to access accurate information or submit feedback. However, for people who are neurodivergent or have a condition which affects their ability to process and retain information, giving incorrect information or not giving clear guidelines on how to use online forms can exacerbate their frustration and confusion.

Recommendations:

- Engage with their patients about the accessibility of their feedback and complaints mechanisms. Consider working with an independent VCSE organisation specialising in community engagement to co-design what would really work for them.
- Provide training to reception staff to make sure they are aware of the NHS complaints process and support available for patients.

Misunderstanding Patient Advice Liaison Service

In our 2024 report [Involvement of people: feedback in hospitals – March 2024](#), we identified that there was a lack of knowledge and understanding of what the PALS service does within a trust. We also found that there was confusion about the difference between PALS and complaints teams.

We made a recommendation within that report for providers to provide clear information about PALS, complaints and independent options for feedback. However, from the experiences we have gathered across the year it is clear there is still confusion on the role of the PALS service.

“I have been experiencing issues with haematology. They keep denying that they have referred me to other services and have still not diagnosed my condition. I keep trying to talk to them about the symptoms I am experiencing but I don't feel they are listening to me. I have submitted a complaint to PALS in the past, and another recently, however they did not acknowledge my current complaint and did not act upon my previous complaint.”

231186, 25–49, mental health condition

“I had to make a complaint before to PALS to ever actually get an appointment.”

231016, 65–79, long-term health condition

“Please could I be urgently appointed with an advocate to assist me with writing a complaints' letter to PALS.”

231070, unknown age, long-term health condition and mental health condition

“The PALS office is inundated, so they are having lots of complaints submitted. It just doesn't have the people, and the good people are leaving.”

230875, 65–79, physical/mobility impairment, long-term health condition, sensory impairment

While the PALS team will pass on a complaint that they receive to the complaints team, this often results in a delay in the complaints

investigation starting. It will also impact on the workload of the PALS team and their ability to provide the support that they are there to provide.

We have also received feedback from people who were unhappy with the service provided by PALS.

“When I was discharged, I was issued with a letter from the senior consultant outlining why I had been sectioned and that I would be cleared from driving, once my medications had settled. The letter contained inaccurate information so I raised it with PALS. The PALS team then kept fobbing me off quoting staff absences etc for their lack of response. When they finally responded they said that the senior consultant would no longer speak about it and signposted me to the CQC, who then sent me to you guys [Healthwatch Surrey Helpdesk].”

230910, unknown age, mental health condition

“I don’t really want to keep escalating. I just want engagement and being deflected incorrectly by PALS...is immensely depressing and immensely reinforcing of the mounting belief that the NHS and all associated bodies have no interest in supporting those in need.”

231002, 50-65, long-term health condition and mental health condition

It is important that it is made clear to people who are seeking support from PALS what is in their remit, as well as independent support in giving feedback or submitting a complaint.

Concerns about feedback impacting on care

People are worried that if they give honest feedback or raise a complaint that it will have a negative impact on their care.

“I have been recommended to make a formal complaint about diabetes care. I don’t want to submit any more complaints, because it just makes things worse.”

230739, 25–49, long-term health condition and mental health condition

“I have been given your number relating to concerns and complaints in Surrey. I don’t want to make a complaint; I have at one point been threatened that they may throw me out. I am in my 70s and have limited mobility so can’t go anywhere else.”

230761, 65–79, long-term condition and physical/mobility impairment

“I have a question and I need some help to find an answer. I put in a complaint to PALS about how I was treated by medical staff in hospital. I then made contact 4 months later to ask a question and one of the hospital nurses had a problem with me for putting in a complaint and was rude to me about it. She told me on the phone that she would not talk to me without another member of staff present on the phone. I felt highly humiliated and ended the call and haven’t sought help for any follow up of my cancer care since. Is this acceptable and normal behaviour and practice after a complaint? I have no intention of taking this further. As it just comes back on me harder.”

231098, unknown age, long-term condition

From the experiences above, we can see that people were reluctant to share their experience directly to a provider, because they were worried about negative consequences. If someone had already fed back or complained directly to the provider, and felt their care had been affected, they refused to take the issue further. This was not due to them no longer wanting to escalate their concerns, but rather because they believe that their care was already affected and they didn’t want to make things worse.

Recommendations: summary

Theme	What would be helpful?
Navigating the system: Feedback, complaints and care	<ul style="list-style-type: none"> Ask about any reasonable adjustments that someone may need when they first submit their formal complaint and ensure any required adjustments are implemented throughout the NHS complaints process
Accessing and navigating digital platforms	<ul style="list-style-type: none"> Ensure that all resources, both internally created or externally sourced are accurate, up to date and as accessible as possible.
Feedback and complaining to the provider	<ul style="list-style-type: none"> Engage with their patients about the accessibility of their feedback and complaints mechanisms. Consider working with an independent VCSE organisation specialising in community engagement to codesign what would really work for them. Provide training to reception staff to make sure they are aware of the NHS complaints process and support available for patients.

Conclusion

Through the experiences we have received in the past year, and the reviews we conducted, we concluded that NHS feedback and complaints mechanisms vary in their accessibility from provider to provider.

What is consistent however is that navigating NHS complaints and feedback mechanisms is challenging, with people simply not knowing how to make a complaint or what to do when they are unhappy with the outcome of it. For those with an additional need this challenge can be magnified.

Navigating digital platforms poses an additional challenge, particularly for those who have a vision impairment and require a screen reader. Having accessible digital platforms, as well as ensuring that there is access to assistive technologies and support in using them for those who need them is vital.

Whilst navigating NHS complaints routes is complicated, complaining directly to providers comes with its own challenges. One of the main concerns that we hear from people who have an additional need or disability is whether giving feedback or submitting a complaint will have a negative impact on their ability to access services and the quality of care they receive. The availability of anonymous, independent feedback mechanisms is one of a number of recommendations we have made to ensure that feedback and complaints mechanisms are as accessible as possible for those that need them the most.

Thank you

We would like to take the opportunity to thank our volunteers who supported us in conducting the website reviews of NHS trusts and GP practices in Surrey. We'd also like to thank all those who shared their experiences with us.

About Healthwatch Surrey

Healthwatch Surrey champions the voice of local people to shape, improve and get the best from NHS, health and social care services. We are independent and have statutory powers to make sure decision makers listen to the experiences of local people.

We passionately believe that listening and responding to local people's experiences is vital to create health and social care services that meet the needs of people in Surrey. We seek out people's experiences of health and care services, particularly from people whose voices are seldom heard, who might be at risk of health inequalities and whose needs are not met by current services. We share our findings publicly and with service providers and commissioners to influence and challenge current provision and future plans.

We also provide reliable and trustworthy information and signposting about local health and social care services to help people get the support they need.



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Luminus

The Healthwatch Surrey service is run by Luminus Insight CIC, known as Luminus. Luminus is a Surrey based, independent, community interest company which exists to empower people to have their voices heard. We help organisations provide equity of access and the best services possible, through the inclusive involvement of local people.



We are committed to the quality of our information.
Every 3 years we perform an audit so that we can be certain of this.

[#EndPovertySurrey](https://www.endpoverty.org.uk/)

We are proud to have signed up to the End Poverty Pledge –
[End Poverty Surrey – Good Company.](https://www.endpoverty.org.uk/)