Health Bill: Supplementary Evidence for the Public Bill Committee

Healthwatch England, 17 June 2026

Introduction

Following the evidence given by Healthwatch England to the Health Bill Public Bill Committee on 16 June, we provide additional information to support the Committee's scrutiny of the Bill.

Healthwatch England takes no position on the Bill. Our evidence is offered to assist scrutiny of whether the proposed new arrangements will preserve the core functions that help people, particularly those least often heard, to influence health and social care services. In scrutinising these changes, members may wish to consider whether the new model will:

- retain an independent route for patients and the public to raise concerns;
- ensure local engagement is shaped by communities, including seldom-heard groups;
- provide a clear way to escalate local concerns nationally;
- maintain a joined-up view across NHS and social care;
- continue to offer practical advice and signposting for people navigating services;
- support transparent publication of patient experience evidence;
- enable independent insight into services, particularly where concerns arise.

Examples of Healthwatch impact

Healthwatch gathers people's experiences locally, including from groups who are often less likely to be heard, and uses that evidence to inform local and national improvement. Recent examples include:

Issue	Local insight	National action	Impact
Youth vaping (2023–24)	Healthwatch Blackpool engaged 4,000+ children and young people, finding 31% of under-18s vaping regularly	Healthwatch England escalated findings to the Chief Medical Officer and the Health and Social Care Committee	Evidence used by MPs to challenge industry and support stronger controls in the Tobacco and Vapes Bill
Corridor care and unsafe winter pressures (2023 onwards)	Local Healthwatch gathered patient stories, including a pensioner left on a corridor for 40 hours without dignity	Healthwatch England analysed and raised concerns publicly and directly with NHS leaders during winter 2023/24	NHS England began publishing national data on corridor care in 2025 and took steps to improve transparency and oversight

NHS waiting list inequalities (2022–25)	Local Healthwatch captured experiences of delays disproportionately affecting disadvantaged groups	Healthwatch England research highlighted disparities and called for demographic breakdown of waiting list data	In July 2025, NHS England published waiting list data by age, sex, ethnicity and deprivation for the first time, enabling targeted action
Barriers in cancer care (2021-22)	Healthwatch Sunderland supported a patient with a learning disability who received accessible screening information but inaccessible follow-up letters, risking missed care	Healthwatch raised this gap with national bodies, highlighting inconsistencies in communication	National 'easy read' templates were introduced across the cancer pathway, improving accessibility and reducing risk
NHS dentistry access crisis (2022 onwards)	Local Healthwatch services reported widespread access issues; Healthwatch Lincolnshire alone recorded 700+ cases including long travel, pain and unmet need	Local Healthwatch and Healthwatch England gave joint evidence to the Health and Social Care Committee	MPs recognised a national dentistry "crisis", with Healthwatch evidence informing recommendations for fundamental reform
COVID-19 disruption to care and patient safety (2020–21)	Nearly 20,000 people shared experiences with local Healthwatch, highlighting confusion, access barriers and safety concerns during the pandemic	Healthwatch England rapidly analysed national insight and escalated issues to NHS leaders and regulators	New guidance introduced on safe discharge, action taken on DNAR practices, and improvements to NHS communication and access.
Fragmented patient records and lack of a single patient record (2018 onwards)	Local Healthwatch consistently heard from patients having to repeat their history and experiencing gaps or errors in records	Healthwatch England used long-term evidence to highlight risks from poor data sharing and call for more joined-up records	Government and NHS are implementing a Single Patient Record, with rollout from 2027 and patient access via the NHS App from 2028.

Further impact case studies are available at: https://www.healthwatch.co.uk/our-impact and Healthwatch awards | Healthwatch

Transparency

Healthwatch England and Local Healthwatch currently publish annual reports setting out their activity, funding and impact. Healthwatch England's annual report is laid in Parliament under section 45C(2) of the Health and Social Care Act 2008, while Local Healthwatch organisations are required to publish annual reports under section 222(7) of the Local Government and Public Involvement in Health Act 2007.

Healthwatch England's latest annual report is available here: We speak up for better care in our annual report | Healthwatch

This reporting provides Parliament, local communities and system leaders with a transparent account of what Healthwatch has heard from the public and what difference that evidence has made. The Committee may wish to explore whether equivalent reporting duties will apply under the proposed new arrangements.

Current statutory functions of Healthwatch not transferring to new model

The Committee may wish to seek clarity on how the following current functions will be preserved or replaced:

Current function	Issue for scrutiny
Locally determined priorities	Will local engagement priorities continue to be shaped by communities themselves, including seldom-heard groups?
Enter and View powers	Will there be an independent power to visit, observe and report on services where concerns arise?
Health and social care remit	Will the new model retain a joined-up view of people's experiences across NHS and social care, particularly at points of transition?
Information, advice and signposting	Will people continue to receive practical support to understand services, rights and choices?
National patient voice	Will there be a clearly identifiable national route for patient experience evidence to inform policy and system oversight?

Escalation from local to national level	How will local concerns be escalated where they indicate national or systemic issues?
Transparency and reporting	Will national and local patient experience evidence continue to be published routinely and independently?

Funding

Local Healthwatch received a total of £25.1 million in core funding from local authorities in 2025/26, with 18 local authorities allocating less than £100,000 to deliver a Healthwatch service. In real terms, this funding had fallen by approximately 44% since 2014/15, with the average local Healthwatch now receiving £164,000.

Local authorities receive £14.15 million through the Local Reform and Community Voices funding stream intended to support this function. Some Integrated Care Boards provide ongoing or project-based funding for Healthwatch, although this varies widely nationally.

Healthwatch England's budget for 2025/26 was £3.35 million.

Further information

If you require any further information about any element of Healthwatch's work, please do not hesitate to contact policy@healthwatch.co.uk