

CONFIDENTIAL

AGENDA ITEM 1

**Healthwatch England Committee Meeting
Held in PUBLIC**

**MS Teams Meeting and in Person at
2nd Floor 2 Redman Place, Stratford**

Minutes of Meeting No. 53 – 24 November 2025

Present

Professor David Croisdale-Appleby (DCA)	HWE Chair	Item 1.7
Jane Laughton (JL)	Committee Member	Item 1.8
Professor Sultan Mahmud (SM)	Committee Member	
Dr Joanna Bircher (JB)	Committee Member	
Debbie Bartlett (DB)	Committee Member	

In Attendance

Louise Ansari (LA)	HWE Chief Executive	Item 1.5
Chris McCann (CM)	Deputy Chief Executive	Item 1.9b
Ben Knox (BK)	Head of Communications	
Gavin Macgregor (GM)	Head of Network Development	
Sandra Abraham (SA)	Head of Operations, Finance & Development	Item 1.9a
Will Pett (WP)	Head of Policy, Public Affairs and Research & Insight	

Guests

Paul Callaghan (PC)	Policy Manager	Item 1.4
Ross Morrison (RM)	Senior Research Analyst	Item 1.4

Apologies

Belinda Black (BB)	Co-Chair Committee Member	
Carmen Fuertes-Riestra (CFR)	Strategy, Planning & Performance Manager	
Clara Duval (CD)	Business Support Coordinator	

No.	Agenda Item	Action Lead
1.1	<p>Welcome and Apologies</p> <p>The Chair opened the formal public session of the Committee. Apologies were noted from Belinda Black, Carmen Fuertes-Riestra and Clara Duval.</p>	
1.2	<p>Declarations of Conflicts of Interest</p> <p>No Declarations of interest were made.</p>	
1.3	<p>Minutes and Actions from previous Meeting</p> <p>The minutes of the meeting held on 24 September 2025 were approved as a true and accurate record.</p> <p>Updates to action(s) were as follows:</p> <p>There were no actions requiring an update.</p>	
1.4	<p>HWE Presentation: GP Referrals: Ross Morrison (RM) and Paul Callaghan (PC) Research and Policy Team</p> <p>RM and PC presented to committee our latest work on GP referrals, building on earlier research which identified a gap in NHS data between symptom onset, referral submission and referral acceptance.</p> <p>The research drew on the views of over 3,000 people and highlighted mixed experiences. While many people were referred promptly, significant numbers experienced delays in referral confirmation, received limited information or choice, or experienced a “referral black hole,” requiring them to chase updates. These issues were strongly associated with dissatisfaction and negative impacts on wellbeing.</p> <p>The discussion highlighted that satisfaction with the referral process increases where people experience earlier referral and confirmation, clear communication, adequate information, choice, and ongoing support.</p>	

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	<p>The Committee discussed the organisation’s proposed recommendations, including the development of a referral’s checklist through the NHS elective minimum standards, improved waiting time information, better referral tracking options, increased administrative support, and consistent implementation of “Jess’s Rule.”</p> <p>The Committee emphasised the importance of clear messaging that earlier referral is beneficial, while recognising that there are clinically valid reasons why referral may not occur at the first appointment.</p> <p>It was agreed that this evidence-based improvement work should inform successor arrangements following Healthwatch England’s closure.</p> <p>The Chair thanked RM and PC and committee noted the update.</p>	
1.5	<p>Chief Executive Report: Louise Ansari (LA)</p> <p>The Committee received the Chief Executive’s report covering activity since the August meeting. The Committee noted the breadth of work delivered by the team during the period and the continued contribution of Healthwatch England and the local Healthwatch network.</p> <p>A question was raised regarding the Health and Social Care Committee relationship and how future accountability for the patient voice could operate following transition. It was noted that maintaining and transferring key relationships would be important and would remain a focus during the transition period.</p> <p>The Committee recorded thanks to the LA for her leadership and impact, including improvements in organisational culture, transformation of the organisation and influence.</p>	

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	<p>The Chair thanked LA, commended on her excellent work and committee noted the report.</p>	
1.6	<p>Committee Members' Report</p> <p>The Committee heard updates from members, including reflections from local Healthwatch contacts and the system context in which local organisations are operating. It was noted that, despite uncertainty, local leaders expressed a degree of optimism about opportunities ahead, while remaining realistic about commissioning pressures and constraints.</p>	
1.7	<p>Chair's Report</p> <p>The Committee received the Chair's report, including engagement activity and external visits. The Chair reported on recent engagement with local Healthwatch and system stakeholders, including a visit to the Isle of Wight. The Committee noted the value of convening senior system leaders to strengthen understanding of, and support for, the patient voice.</p> <p>The Committee discussed observations from local visits, including the role of public health and health scrutiny in supporting local Healthwatch impact and ensuring evidence is used to drive questions and accountability.</p> <p>The committee noted the update.</p>	
1.8	<p>Audit, Finance and Risk Sub-Committee Update - July Budget 2025/26: Jane Laughton (JL)</p> <p>JL, AFRSC Chair, gave committee a brief update on the last AFRSC meeting that took place on 1 December 2025. It was noted that matters had largely been covered through the business plan/KPI and transition updates. The Committee noted that AFRSC had received assurance regarding transition planning and</p>	

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	<p>transparency in how staff are being supported through the process.</p> <p>The Chair thanked JL, and the committee noted the update</p>	
1.9a	<p>Business Plan Performance and KPIs Report for Q2 2025/26: Sandra Abraham (SA)</p> <p>The Committee received the Q2 2025/26 Business Plan Performance and KPIs report from SA. The Committee noted that despite the transition context, strong outcomes had been delivered across the period, including:</p> <ul style="list-style-type: none"> • increased public engagement and “Have Your Say” activity, • improved digital reach and insight, • continued local network impact, • a valued learning and development offer, • policy and research progress (including the King’s Fund work and recent men’s health and LGBT/trans-related outputs), • effective management of organisational change, alongside continued financial controls. <p>The Committee noted that workstreams paused or stopped due to transition had been removed from reporting to ensure the report focused on work that is active, completed, or on track.</p> <p>The Chair thanked SA, and the committee noted the update</p>	
1.9b	<p>EDI Q2 Quarterly Report: Chris McCann (CM)</p> <p>The Committee received the EDI Quarterly Report from CM and noted that EDI remains embedded as a core lens across Healthwatch England’s work, including policy and research, communications, operations, digital activity, and organisational culture.</p> <p>The report included highlights on the men’s health report, work on trans and non-binary people’s experiences of GP services, and</p>	

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	<p>progress on the Accessible Information Standard. The Committee noted the link between communication and reducing stress for people navigating care pathways.</p> <p>The Chair thanked CM, and the committee noted the update</p>	
2.0	<p>Forward Plan (Public Committee Meeting): Chair</p> <p>The Committee discussed the Forward Plan and invited suggestions for future agenda items and workshops, noting that the committee’s focus is expected to evolve as the organisation transitions and downsizes.</p> <p>It was noted that future committee business is likely to place greater emphasis on assurance over the transition and closure process, with fewer large-scale flagship work presentations.</p> <p>The Committee agreed that a planned workshop should be rescheduled to January to ensure it is timely and adds value, given overlap with current agenda content.</p> <p>Action:</p> <ul style="list-style-type: none"> • CM/Josephine to identify and circulate a revised date for the workshop in January and confirm the proposed focus in light of transition priorities. 	Chris/ Josephine
	<p>Questions from the public</p> <p>No questions were raised.</p>	
	<p>AOB</p> <p>The Chair paid tribute to Louise Ansari on her final Committee meeting, offering formal thanks and recognition for her leadership and contribution to Healthwatch England.</p> <p>The Chair reflected on the significant transformation of the organisation during Louise’s tenure, noting that this had been a genuine and sustained transformation rather than change in name only. Under her leadership, Healthwatch England had</p>	

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	<p>strengthened its influence and impact at a time when many organisations had found meaningful change difficult to achieve. The Chair highlighted Louise’s success in ensuring that the organisation’s research translated into practical, outcome-focused work that has made a tangible difference to people’s lives, alongside an increased level of national and political influence.</p> <p>The Chair also commended the strong organisational culture Louise had fostered, characterised by professionalism, consistency, and positivity. It was noted that her leadership style encouraged constructive problem-solving and a focus on opportunity, which had been widely reflected in the approach and confidence of staff and executive colleagues.</p> <p>Particular recognition was given to Louise’s commitment to mentoring and supporting staff, and to her personal integrity, independence, and willingness to speak truth to power in pursuit of impact and public value.</p> <p>The Chair concluded by acknowledging the growing national recognition of Louise’s work and leadership, expressing personal appreciation for her contribution, and wishing her every success for the future. The Committee was informed that a formal presentation of thanks would follow in due course.</p> <p>The Committee commended Louise for her leadership and contribution to Healthwatch England and wished her well for the future.</p>	
	<p>The Chair concluded the public meeting.</p>	

Scroll down for the Action.

HEALTHWATCH ENGLAND PUBLIC COMMITTEE MEETING – ACTION LOG

24 November 2025

AGENDA ITEM	LEAD	ACTION	UPDATE	DEADLINE	STATUS
Item 2.0 – Forward Plan	Chris McCann & Josephine Buckle	Identify and circulate a revised date for the workshop in January and confirm the proposed focus in light of transition priorities.	The Committee workshop was rescheduled to 12 January 2025.	2 Jan 2025	Complete