

FOR IMMEDIATE RELEASE

Equality assessment for NHS 10-Year Plan overlooks loss of independent patient voice, Local Healthwatch leaders warn

Local Healthwatch organisations have warned that the Government’s Equalities Impact Assessment (EQIA) for the NHS 10-Year Health Plan fails to fully consider the impact of losing independent patient voice and scrutiny, as required under the **Public Sector Equality Duty (PSED)**.

The EQIA, published on 17 December, refers extensively to “patient voice” and “patient feedback”, but largely frames these through digital tools such as the NHS App, surveys and experience metrics. Healthwatch says this risks confusing data collection with meaningful, independent patient voice and engagement — particularly for people who already face barriers to care.

“Patient voice cannot be independent if it is owned and controlled by the system it is meant to scrutinise,” said Sabrina Taylor, CEO at Healthwatch Nottingham & Nottinghamshire.

Local Healthwatch organisations have provided independent oversight of local health and care services for over a decade, gathering intelligence from communities through engagement, reports, and direct visits to services. They use this evidence to influence change and hold providers accountable, and guide members of the public to access the services they need. This includes people from marginalised communities, those who have experienced poor or unsafe care, and people who lack confidence in formal or digital systems

National evidence supports these concerns. Healthwatch England's most recent complaints research shows that while almost a quarter of people experience poor NHS care, fewer than one in ten go on to make a formal complaint, and more than half of those are dissatisfied with the process or outcome. This points to deep-rooted issues of trust and confidence that cannot be addressed simply by expanding provider-controlled feedback mechanisms.

The EQIA does not assess the foreseeable risk that marginalised or protected groups may be less willing or able to engage with NHS-owned feedback routes, nor does it consider the role that independence plays in rebuilding trust, balancing power and ensuring accountability. The Mid Staffordshire NHS Foundation Trust scandal shows the grave failures of an NHS culture that was narrow in its vision and unreceptive to concerns. Healthwatch organisations stress that, without independent scrutiny, NHS bodies at both the national and local levels will be left to "mark their own homework".

While proposals suggest that the functions of local Healthwatch could be absorbed into Integrated Care Boards or local authorities, there is currently no clear model for how independence, transparency or external scrutiny would be preserved. The EQIA instead places significant emphasis on the NHS App as a primary feedback route, despite longstanding concerns about digital exclusion.

"When people's trust has been damaged by poor care, they often do not turn back to the same system to report it," Sabrina Taylor added. "Local Healthwatch are embedded in their communities and work directly with people whose voices are most easily lost. That role cannot simply be replaced by an app."

Healthwatch is urging the Government to meet its legal duties under the **Public Sector Equality Duty** by fully considering the equality

implications of losing independent patient voice as NHS reforms progress. This is essential to ensure that changes intended to improve patient experience do not inadvertently widen health inequalities.

Notes to Editors

What is local Healthwatch?

Local Healthwatch is the statutory health and social care champion for people in England. There are 152 local Healthwatch services, each commissioned by their local authority and working independently to gather public feedback, provide information and signposting, and influence improvements in care.

Annual Reach:

Healthwatch helps over one million people each year to share their experiences and access support and advice about health and social care services.

Policy Context:

The 10-Year Health Plan for England, published on 3 July 2025, and the Penny Dash Review of Patient Safety, published on 7 July 2025, both propose ending the independent patient voice by closing national and local Healthwatch bodies. They suggest transferring public engagement functions to NHS commissioners and local authorities.

The **Public Sector Equality Duty (PSED)** Under the Equality Act 2010 requires public bodies, including the NHS, to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between people with protected characteristics.

The Mid Staffordshire NHS Foundation Trust Public Inquiry examined the causes of the failings in care at Mid Staffordshire NHS Foundation Trust between 2005 and 2009. The 290 recommendations [in the report](#)

highlight the need for openness, transparency and candor throughout the healthcare system.

Why Independence Matters:

Independent advocacy ensures that feedback is not filtered or softened and that services are held accountable. Local Healthwatch's impartiality is essential for building trust and driving meaningful change in health and care systems.

HWE Report Link: [A pain to complain: Why it's time to fix the NHS complaints process | Healthwatch Data](#)

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