



West Yorkshire Voice Evaluation Report

June 2026



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Introduction

Between July 2022 and March 2026, the NHS West Yorkshire Integrated Care Board (WY ICB) funded Healthwatch working together across West Yorkshire to coordinate a network called West Yorkshire Voice (WYV). This formed part of wider partnership working between the local Healthwatch organisations across West Yorkshire and with the West Yorkshire ICB (WY ICB). The main aim of West Yorkshire Voice has been to make sure that local people's voices are at the heart of health and care decision making across West Yorkshire.

The coordination of West Yorkshire Voice has recently transitioned into the West Yorkshire Integrated Care Board (WY ICB). As part of this handover and transition, Healthwatch across West Yorkshire have collated this summary report and undertaken an evaluation which reflects on the initial aims of the network and its success in delivering on these.

We gathered feedback about West Yorkshire Voice via a survey and through individual conversations between March and May 2026. This enabled us to hear from network members about what has worked well and what might improve things in the future of the network.

This report is both an overview of the work undertaken by West Yorkshire Voice between July 2022 and March 2026, as well as an evaluation of running a West Yorkshire-wide network for people's voices in health and care services.

Key Reflections

1. For a network like West Yorkshire Voice to be able to hear all voices, the focus should be on how to listen to and reach different voices, as well as simply increasing the number of members.
2. Having a key point of contact for the network allows people to feel more comfortable and able to share their experiences.
3. For a representative network to be effective, it takes focused time to build relationships, build trust and to outreach to communities.
4. People value the option to share their feedback with someone who is independent. This can help people feel more at ease with sharing their honest feedback.
5. People want to see the impact of their feedback within services. Communication should be transparent about how much people can influence change and the reasons why decisions are made.

If all these things are done well, people are more likely to continue to share their feedback.

About West Yorkshire Voice

Developing the concept

West Yorkshire Voice was launched in March 2023 after an initial working group, coordinated by Healthwatch working together across West Yorkshire, heard from local people about their thoughts on creating a 'people's panel'.

People told us that to encourage their involvement, they wanted to see:

- Different ways to get involved.
- Accessibility, such as disabled access, hybrid meetings and easy read materials.
- Incentives such as payment/vouchers, food and refreshments, and expenses.
- Evidence that their feedback will make a difference.

Aims

From hearing from the public and working with the West Yorkshire Voice Steering Group, the main aims of West Yorkshire Voice have been to:

- bring the real voice of people with experience and unpaid carers into decision-making.
- give an opportunity to those who may not normally be involved and include the voices of those facing the greatest health inequalities.
- enable and support diverse involvement and representation.
- form a key part of how health and care services, through the NHS West Yorkshire Integrated Care Board, are held to account by the people of West Yorkshire.

How was it coordinated?

The West Yorkshire Voice Coordinator role led on this work as the central point of contact for network members. The Associate Director of Healthwatch working together across West Yorkshire oversaw the line management of the West Yorkshire Voice Coordinator and supported with directing the work.

Both these roles worked closely with the Deputy Director of Communications and Involvement, the Insight, Involvement and Consultation Lead, and the wider WY ICB involvement and communications team, as well as local Healthwatch managers across West Yorkshire (Bradford and District, Calderdale, Kirklees, Leeds, Wakefield and North Yorkshire).

What we did

Membership

Between June 2022 and March 2026, the West Yorkshire Voice network has grown to include 695 members, made up of 381 individual members and 314 contacts representing 258 organisations or groups.

Integrated Care Board Meetings

What did we do?

West Yorkshire Voice has played a key part in feeding people's voices into senior level decision-making such as at the **Integrated Care Board (ICB) meetings**.

The board meetings have included a 'focus on' areas such as access to primary care and mental health services, all with a focus on bringing the voices of people at risk of, or experiencing, health inequalities. West Yorkshire Voice contributed to bi-monthly and quarterly board meetings which have focussed on:

- mental health
- Winter
- hospital care
- primary care
- working age adults
- children and young people
- older people
- maternity and preconception

This was done through:

- Supporting individuals and community groups to attend 'pre-engagement sessions' ahead of board meetings. These sessions brought members of the public and community organisations together with Board members and senior, clinical and operational staff to have open conversations around experiences and future planning.
- Facilitating one-to-one and group discussions to hear from people about their experiences. These learnings were then fed into briefing papers written by Healthwatch working together across West Yorkshire and presented at board and committee meetings of the ICB.

What was the impact?

The following briefing papers were presented by Healthwatch working together across West Yorkshire at the West Yorkshire Integrated Care Board (ICB) board meetings:

- [March 2025: Focus on maternity and preconception](#)
- [December 2024: Focus on health inequalities - older people](#)
- [September 2024: Focus on health inequalities - children and young people](#)
- [June 2024: Focus on health inequalities among working age adults](#)
- [March 2024: Focus on hospital care](#)
- [January 2024: Focus on winter](#)
- [August 2023: Focus on mental health](#)

“It was interesting that the public’s recommendations were aligned with what we are trying to improve. Giving your service assurance to show what we are doing is important as it shows we are integrating and responding to the voice of communities. Voice work is crucial but as you know is not well practiced across the board.”

“West Yorkshire Voice is a great asset for NHS West Yorkshire ICB, and the wider Partnership. It has been instrumental in making sure people’s views and experiences are at the heart of what we do; from decisions made at our board, to how people get to their appointments. Recently it has helped shape the future of involving people in the decisions we make, and we look forward to it continuing to make a huge difference as the role of the ICB changes.”

Paul Hemingway, Deputy Director of Communications and Involvement, West Yorkshire Integrated Care Board.

“All of the different elements of West Yorkshire Voice have informed decisions about health and care support time and time again. Their views and experiences have made a difference in lots of ways: how Neurodiversity support is planned and run, how the 10-year plan will benefit the people of West Yorkshire, and giving a voice to people who are often not able to tell their story. We are truly grateful for the time people have invested in giving their views and experiences and look forward to the difference they will make in the future.”

Colin Hurst, Insight, Involvement, and Consultation Lead, West Yorkshire Integrated Care Board.

West Yorkshire Health and Care Partnership (WYHCP) Board Meetings

What did we do?

West Yorkshire Voice has supported the people's voice agenda item at the West Yorkshire Health and Care Partnership (WYHCP) Board meeting. Working closely with leads from within the WY ICB, we have worked with our network of networks to gather key insight from members (professionals and individuals) around experiences and feedback relevant to the agenda items.

It has been important to add a more human element to the section on people's experiences within these meetings, providing context and enabling a mechanism for people to feel truly listened to. This has included sharing video and audio recordings created with members of our network, and sharing case studies.

What was the impact?

In June 2025, we had a group discussion with three people about how their recent housing issues have impacted on their health. People shared examples of how poor housing conditions such as damp, dust, rats and worries about safety have affected theirs and their children's health. We worked with people to create a [video about their experiences to help highlight the impact that poor housing conditions can have on someone's health](#), which was played at the [West Yorkshire Partnership Board meeting on 15 July 2025](#).

This has since been used as part of the national networked data lab project in Leeds and included in the housing and health insight report, which has helped to fill gaps in and complement statistical data. One of the participants also shared that recently the council have acted around the housing issues they described in the video and thanked us for supporting them to raise this.

Our West Yorkshire Voice Coordinator later followed up with one of the participants to support their story to be raised with the Children and Young People's Long Term Conditions Programme within WY ICB. This case study and the importance of good housing conditions in relation to allergies and asthma has agreed to be added to a future agenda of the asthma network. We produced a [collaborative version of this case study which has been published by the West Yorkshire ICB](#).

"If we ever needed a clearer example of why 'more voices in more rooms' get us to better planned, coordinated and compassionate care, then yesterday was a textbook example."

"Beyond the numbers, it is very important to hear the stories of people with lived experience. Listening to the audio conversations is a very powerful and creative way to understand what matters to people around the topic. It brings the project to life, especially when you have conversations with decision makers in order to make a change."– Staff member from Leeds ICB.

West Yorkshire Voice steering group

What did we do?

To help steer the work of West Yorkshire Voice and ensure this remains accountable to the public, we coordinated the West Yorkshire Voice steering group, which meets every two months.

The steering group has been made up of representation from local Healthwatch across West Yorkshire, West Yorkshire ICB, the voluntary sector, local healthcare services, members of the public and community volunteers. Members of the steering group bring multiple viewpoints from which they are approaching the role, including both personal and professional experiences. Membership has included the WY ICB non-executive member for citizens and future generations (and acting WY ICB Chair) to help bring the steering group closer to strategic decision making.

The steering group has overseen the work of West Yorkshire Voice by checking that it is in line with the agreed workplan and assuring the quality of work being done.

They have:

- Supported the ongoing development of West Yorkshire Voice, making sure that it meets the needs of the people of West Yorkshire, Healthwatch and the Integrated Care Board and Partnerships.
- Collectively used knowledge, links and expertise to direct and support work to address gaps in West Yorkshire Voice membership and ensure the voice of those experiencing the greatest health inequalities is included.
- Monitored progress of commitments and projects, for example:
 - How feedback and outcomes will be shared.
 - Making sure people can be involved in different ways.

- Making sure all information produced by West Yorkshire Voice is simple, clear and accessible.

What was the impact?

The steering group have been integral to the development and delivery of West Yorkshire Voice and have contributed to the handover and transition process of moving the coordination of West Yorkshire Voice into the ICB.

"Being part of the West Yorkshire Voice Steering Group has been a valuable opportunity to ensure that the voices of local people and communities are heard and influence decisions. Bringing together people with lived experience and community perspectives helps keep the work grounded in what matters most. Going forward, it is important that the Steering Group continues to provide this independent public voice, helping to shape priorities, challenge where needed, and ensure that services are developed with communities rather than just for them. I have found being part of the group to be collaborative, inclusive and genuinely focused on making a positive difference across West Yorkshire. Thank you."

West Yorkshire Voice steering group member.

"Being part of the steering group has been a rewarding experience. It has given me a chance to contribute to shaping local services and to understand the complexities involved. I believe it's crucial for community members to be involved because it keeps the process grounded in real people's experiences and needs."

West Yorkshire Voice steering group member.

Newsletter and communicating with the network

What did we do?

The main form of communication to all members of the WY Voice network is through a monthly newsletter. The newsletter includes updates from across West Yorkshire (from Healthwatch, WY ICB and wider partners), information on opportunities to be involved, requests for people to share their experiences on specific topics, invites to groups or to be part of a conversation, feedback from previous engagements and the impact of this.

There have been 36 newsletters and mailouts to West Yorkshire Voice individuals list since October 2023. The newsletter has had on average a 51% open rate and an average of 102 link clicks per newsletter.

What was the impact?

“All the newsletters have been very interesting and have contributed by giving my opinions in surveys and experiences.”

“The communication is very good, and I am kept informed of what Yorkshire voice is doing”

Supporting with involvement and engagement

What did we do?

West Yorkshire Voice has supported the West Yorkshire ICB and other partners (for example: provider collaboratives, third sector organisations, researchers, West Yorkshire Combined Authority) with their involvement and engagement work:

- Promoting the approach of ‘starting with what we know already’ by sharing existing insights and connecting professionals together who are doing/have done similar engagement work. This has also included promoting the use of the West Yorkshire Insight Library.
- Sharing opportunities via our individual member list and network of networks, both through the newsletter and tailored communication or introductions.
- Sharing suggestions on how to make communication about opportunities and events more accessible and inclusive.

What was the impact?

People’s voices have been included in projects on topics such as obesity and weight; the work, health and skills plan; and End of Life Care.

“During the period Sept 24 to Jan 25 West Yorkshire Combined Authority commissioned KADA Research to engage the Work and Health eco-system to write a Work, Health & Skills Plan, the first of its kind for West Yorkshire. The project involved a series of individual conversations between KADA and a variety of different stakeholders including people with lived experience of worklessness due to ill-health. George and Healthwatch proved invaluable in making introductions for us at KADA to various people he worked with who had lived experience and were willing to tell their story to hopefully benefit others in the shape of an effective plan. With George’s help we were able to ensure that a truly representative selection of individuals expressed their hopes and aspirations for a better system informing our understanding towards how we can collectively work differently in West Yorkshire to bring about lasting positive change.”

Kada Research (supporting West Yorkshire Combined Authority work, Health and Skills plan).

“Being a part of the West Yorkshire Voice Network keeps our work connected to communities. Hearing about what matters to people is something that should be driving all of our work and priorities. Connecting with the team has enabled us to be connected to young people and find out more about their experiences of mental health and what they think about the services available to support them. The team have also connected us to many other organisations across sectors, who support these young people. West Yorkshire Voice is invaluable. It is an opportunity to connect with others, be up to date with key things and also as a space to advocate for change. The team are so friendly and welcoming, they will help you in any way they can.”

Dominique Burley, Project Coordinator, West Yorkshire Provider Collaborative for Children and Young People's Mental Health Inpatient Services.

Neurodiversity

The West Yorkshire Health and Care Partnership delivered 'The West Yorkshire Neurodiversity Summit' in December 2023. The event brought together health and care professionals with partners from education, local councils, community groups, the voluntary sector, and people with lived experience from across West Yorkshire.

What did we do?

West Yorkshire Voice asked people who have lived experience and carers to share their views and ideas with us before the event. We highlighted people's experiences in this report [Life on Hold](#).

“We also wanted to say how much we value the Life on Hold research- it's an excellent piece of work that we often reference when evidencing the need for services like ours. It captures so much of what we hear daily from the people we support.”

Local Neurodivergent Organisation.

What was the impact?

The Life on Hold report and the wider experiences documented as part of the Neurodiversity co-production project led by Touchstone have been continually raised and fed into decision making within West Yorkshire. For example, when the new specification for all-age neurodiversity services was

discussed at Transformation Committee, we were able to offer feedback based on what we heard from people during the 'Life on Hold' research.

“WY Voice have been incredibly supportive and enthused about the coproduction work being done with the WY Neurodiversity Programme. George has introduced me as a coordinator to a number of different experts by profession as well as experts by experience and the relationships built from those partnerships have had a significant impact on the quality and diversity of the work we’ve been doing. WY Voice has been able to disseminate and bring back information to and from communities that we may not have otherwise reached, and George in particular has been consistent in their offer of support to reach intersectional groups and workstreams.”

West Yorkshire ICB Equality, Diversity and Inclusion Strategy

What did we do?

Over the course of July 2024, West Yorkshire Voice supported the West Yorkshire ICB to hear from local people about what they wanted to see included in the new Equality, Diversity and Inclusion (EDI) Strategy. We planned and facilitated seven focus groups; two were online and five were held in person in Wakefield, Leeds, Kirklees and Calderdale. We had a total of 42 participants attend the focus groups and an additional four individual conversations.

We also attended a 'Stakeholder Day', which was run as another method of hearing from people. For both this event and the public survey, we provided feedback and advice around accessible communication.

Following our group sessions, we highlighted the gaps in the demographics of the people who attended and suggested groups who could be involved during phase 2.

In October 2024, we published our **Equality, Diversity and Inclusion report** summarising our engagement work which fed into the strategy. We shared key themes that we had heard during these focus groups on the **live podcast hosted by West Yorkshire ICB, 'Can you see me?'**. When the ICB later published the final strategy, we worked alongside West Yorkshire Voice members to create some videos to demonstrate the importance of the strategy reflecting what people told us about involving people's voices and race equity.

- **Foreword on the Equity and Fairness Strategy from Healthwatch across West Yorkshire**

- **Race equity in health and care services**

What was the impact?

One of the findings of the work was that there needs to be stronger accountability for the implementation of any future EDI strategy so that it does not 'sit on a shelf'. In January 2025, the Equality Diversity Inclusion Transformation Lead for WY ICB sent an ask to all partners across West Yorkshire for two-to-three organisational priorities to be shared based on the new strategy. This is also reflected on their **'you said, we heard' webpage**.

The published strategic objectives were reflective of themes brought out in the focus groups, with objectives 1, 3, 5, 6, 7, 8, and 9 directly relating to the findings and recommendations of the Life on Hold report.

"Thank you for the excellent facilitation last week at the King's Centre and for the thorough notes and feedback. You have done an excellent job when far too often local people give their time to try and make a difference and then they hear nothing back. We, of course, know that this is not genuine co-production."

Patient Transport

What did we do?

To support the ICB to hear from people about their experiences of non-emergency patient transport, we developed an **animated video resource about the 'how do you travel to medical appointments survey'**. This aimed to simplify and explain the purpose behind the work and survey questions. The WY ICB shared this on their non-emergency patient transport consultation webpage and in other communications about the survey to support accessibility of the information.

In addition to this, West Yorkshire Voice attended six groups and spoke to 28 individuals, as well as having conversations with four individuals and eight professionals working in community organisations. We shared what we heard from people with the West Yorkshire ICB to feed into the decision making around the new patient transport criteria.

It was decided subsequently that the criteria would be implemented in line with national guidance, and in response we have raised concerns about how this may affect some people who previously met the criteria and the need for greater awareness raising among the public about patient transport and alternative support such as the Healthcare Travel Costs Scheme.

What was the impact?

As a result of this initial work, we were invited to be involved in an ongoing review process around the impact of the new criteria, which included the creation of an appeals process for refused patient transport requests. To support this, we asked people to contact us if they had experienced their patient transport request being refused.

Between April and September 2025, we received feedback from 43 people about patient transport refusals, either through contacting West Yorkshire Voice or one of the local Healthwatch teams. Many of these contacts have resulted in being able to provide people with more information including how to appeal, which in some cases have been successful. We also shared feedback from people about patient transport with Yorkshire Ambulance Service NHS Trust directly to support them with their service improvement.

We will continue to work closely with the West Yorkshire ICB around non-emergency patient transport.

Inclusion health voices and network

What did we do?

As part of our commitment to hearing from those at the greatest risk of health inequalities, West Yorkshire Voice supported the WY ICB to listen to people from **inclusion health** groups. Our West Yorkshire Voice Coordinator attended and fed into the quarterly 'Inclusion Health Unit' meeting, which brought together professionals from the ICB, local health services and third sector organisations to discuss improving approaches to supporting inclusion health groups.

In May 2024, we supported the West Yorkshire Integrated Care Board (WY ICB) to run a community development day where we invited professionals from organisations who support people and individuals from diverse communities to come and share their thoughts around the ways in which we can involve the voices of people from inclusion health groups.

As part of the session, we discussed how people from certain communities who experience various barriers to accessing healthcare could hold the WY ICB to account. This stemmed from an idea of potentially creating a 'community board' which may act as a 'shadow board' to the ICB.

Following this event and once the initial relationships had been built, we developed a sub-network of West Yorkshire Voice formed of 66 professionals working in 59 different organisations, focussed on supporting people from inclusion health groups across West Yorkshire. As part of this work, we also produced a wider mapping document which outlined the main organisations supporting people from inclusion health groups across West Yorkshire from both desktop research and conversations with professionals.

During the development of this sub-network, we focussed more of our engagement work with people from inclusion health groups. For example, between January and April 2025, we facilitated several groups and individual conversations about the shift from “Hospital to Community” care as part of the [NHS 10-Year Health Plan for England](#). These conversations were with people (and staff supporting those) who have had experience of the criminal justice system, people who have been involved in sex work and people from Gypsy, Roma and Traveller communities (sometimes referred to as inclusion health communities).

What was the impact?

From these conversations with organisations working with people from inclusion health groups, we were able to share information about inclusion health training which has since been included into the [inclusion health training framework and directory](#), which was developed as part of an WY ICB fellowship.

This also led to some joint working with the WY ICB to create a series of videos to be used for the training and development of health and care staff, focusing on the experiences of people from inclusion health groups.

Supported self-management of health

What did we do?

In the context of planning around the NHS 10-Year Health Plan for England and the move towards Integrated Neighbourhood Health, we saw a gap in what we know about people's experiences of self-managing their health. Across the health and care system and policy, we had been seeing an increasing move towards ‘supported self-management’, a term often used to mean increasing someone's knowledge, skills and confidence to manage their own health.

Through an online survey and outreach into communities, we heard from 155 people about their thoughts and experiences of self-management; what has helped them and what the challenges of self-management are. We

summarised these experiences, including two good practice case studies, in our **'Self-management of health report'**.

What was the impact?

The report is being used to inform the development of Neighbourhood health across West Yorkshire and will form part of a set of resources to support neighbourhood health teams. The findings of the report have been shared in various forums and will continue to be highlighted within key conversations around the move from hospital to community care.

“Your themes and key messages will definitely help us to understand how we can adapt our approach to improve patient lives. I will be sending this out to my team so they can reflect on the report's insights.”

Team Leader, Locala Self-Management Team.

Our reflections as Healthwatch

What has worked well?

Developing a 'network of networks'

In addition to asking individuals to share their experiences of health and care services, West Yorkshire Voice has worked with and grown our membership of representatives from organisations who support and work with local communities across West Yorkshire. We took this approach due to recognising the significant barriers that many individuals face to getting involved in engagement opportunities and having their voice heard. This approach also sought to recognise and value the great work already happening and the rich knowledge and experience of professionals working with communities.

Going to communities

Much of the West Yorkshire Voice engagement work has involved visiting groups and organisations or attending events run by partners to speak to communities.

We have worked with this 'network of networks' to work with and hear from communities in the ways that work best for them such as:

- Meeting in spaces where people already meet.
- Attending existing groups or meetings in trusted locations.
- Meeting people where they feel comfortable.
- Booking community venues.

We have also attended various stalls, and community events open to the public to listen to feedback and grow the network of members through in person sign-ups.

"You are well embedded in the community with established and trusted links which results in more authentic voices."

Hearing from professionals

The network of networks has not only enabled us to speak to groups and individuals who may not want to join the network directly, but also to hear from professionals about key feedback they hear in their day-to-day work. We value that professionals who support people every day have great insight into people's experiences and can offer a perspective of common themes and how these have changed over time.

For each upcoming West Yorkshire Health and Care Partnership Board, WY Integrated Care Board and WY ICB Committee Meetings, we were able to

reach out to relevant professionals about specific topics due to be discussed and gather feedback to be shared at the meetings.

Accessibility

When writing and designing any external communications, a key part of our focus was on ensuring they are accessible. We sought advice and support from staff who have accessibility expertise both in the West Yorkshire ICB and local Healthwatch teams. We also heard feedback from the West Yorkshire Voice Steering Group and wider network members about how to improve our newsletter and other forms of communication such as surveys, social media and print materials.

This has also included supporting and advising partners within WY ICB and other local health and care stakeholders about how to communicate with the public about opportunities to get involved.

Connecting people to local and regional opportunities

As part of our work, we often have conversations with individual members about their interests and how they would like to be involved in shaping health and care decision making.

Having a West Yorkshire Voice Coordinator role enabled us to take a more personalised approach, being able to do things such as:

- Contact those providing opportunities to clarify questions for West Yorkshire Voice members.
- Supporting West Yorkshire Voice members to access opportunities if doing this independently was a barrier, such as. doing email introductions.
 - For example, during one piece of work, someone contacted us saying they had been removed from an online focus group due to not turning on their camera. We were able to support them to rejoin a future meeting by liaising with the person leading the opportunity.
- Research opportunities for individual members in their specific areas of interest.

Case study

After connecting with new West Yorkshire Voice member, Bruce Yardley at a local involvement group, George (West Yorkshire Voice Coordinator) shared some further opportunities with him as he was keen to get involved in influencing work to do with strokes. George shared information about the Leeds Health and Care Partnership **'stroke priorities report'** and connected

him with a West Yorkshire wide co-production group **'Life after Stroke'** within West Yorkshire Association of Acute Trusts (WYAAT).

Bruce was able to write some feedback about the stroke priorities report based on his own experiences and shared this with Leeds involvement team. He was then invited to a meeting of the Stroke Programme Board to share his feedback.

Bruce has now written a blog as an active member of the **Life after Stroke Co-Production Group**.

"Thank you for all your efforts which really helped me get engaged much more than would otherwise have happened."

What has been challenging and how we have managed it?

Closing the feedback loop

At Healthwatch, we believe that an important part of maintaining people's confidence to keep sharing feedback with us and the WY ICB as commissioners of services, is making sure we go back to people and tell them anything that has (or has not) changed because of their feedback and input.

This was something that we made sure featured as part of our newsletters and communications to members:

- Whenever we visited a group or spoke to an individual about their experiences, we shared a written copy of our conversations and any subsequent reports with them and offered opportunities for amendments and additions.
- We shared examples of where (e.g. board and committee meetings), how (e.g. verbally, via a report, in a video format), and to who (which decision makers) we had presented people's feedback.
- On the West Yorkshire Voice webpages, we shared links to reports and briefing papers on the **'how your voice has helped' section**.
- We have sent out specific mailouts with updates on particular pieces of work and what has happened as a result **e.g. patient transport update**.

However, one challenge in this project was feeding back to people around tangible changes which have taken place because of their input and supporting people to feel the positive impacts of sharing their feedback at a West Yorkshire level. This was especially the case during pieces of work which have fed into high level planning and strategy such as the feedback we gathered around the NHS 10-Year Health Plan for England.

One of the ways in which we have sought to overcome this challenge has been through developing a framework to encourage professionals in ICBs and providers to feed back about what has changed because of people's feedback. Before handing over the coordination of West Yorkshire Voice to the WY ICB, we trialled this model in a recent newsletter around the topic of carers support. This enabled us to share two in depth articles from West Yorkshire Integrated Care Board and the local team in Wakefield, which contained specific examples of the positive work taking place to provide better support for carers.

Maintaining relationships as the network grows

At the start of the West Yorkshire Voice work, it quickly became clear that building and maintaining relationships would be key to West Yorkshire Voice's success. This has been difficult at times with a network covering such a large geographic area such as West Yorkshire, and the diversity of health and care services within it. At the beginning of the network, with smaller member numbers, it was much easier to build and maintain relationships. As the network continues to grow, it will be important to embed mechanisms and dedicate capacity to continue to communicate and maintain relationships with individual and group members.

Timeframes

Some of the work we have supported has involved short timescales. In these circumstances we have had to manage expectations around the feasibility of reaching certain voices within these timescales. We know that some communities have limited trust in health and care services and find opportunities to share their voices inaccessible. Therefore, it's important to take time to build up trust in order to grow relationships with the communities that we often hear from the least.

Clear communication about opportunities

One of the challenges we have experienced when we have been asked to share information about opportunities for people to share their experiences and have their voices heard, is inaccessible or unclear communication.

Having a dedicated West Yorkshire Voice Coordinator has enabled us to have time to clarify information about opportunities and adapt information for sharing as needed.

We found that some information about opportunities for involvement was sometimes missing, such as:

- What age range is the opportunity aimed at?

- Is it just for adults or does it include children and young people?
- If it is for young people, what age does that go up to? (can be different for Special Education Needs and Disabilities (SEND))
- If it is for older age adults, what is the starting age?
- Does the opportunity include Craven if it's across West Yorkshire? - Craven can often be missed and not everyone may know their health is classed as within West Yorkshire.

Accessibility

While we have taken several steps to improve the accessibility of our engagements and communications, there are still areas where further development is needed. For example, one of our network members supported us to produce an Easy Read leaflet for West Yorkshire Voice. However, with only having one staff member leading the network, we had limited capacity to produce additional Easy Read versions, e.g. for the newsletter and surveys, but believe this would be highly beneficial for members and the public.

What have people told us?

Between March and June 2026, we ran a survey with existing West Yorkshire Voice members to hear about their experiences of being part of the network.

We had 41 responses from 24 individual members, ten group members and seven people working within West Yorkshire or local ICB or a Health and Care Partnership.

What works well?

From individual and group members, we heard that:

- West Yorkshire Voice helps them to stay up to date with opportunities to share experiences and have their voices heard.

“It's a good informative platform and offers opportunities to get involved in projects where I think I can make a difference.”

“I've been able to tell about my experiences with referrals which has been very helpful to me and say how I felt while waiting for an appointment.”

- People have appreciated opportunities to get involved virtually.
- It's helpful to have a key point of contact for the network.
- People have felt listened to and heard.

“I have found the work really helpful and found George a great person to contact for information and connections.”

“I have sent resources and emailed George quite a few times they always respond to my emails and is always interested in what I present to them. I feel heard listened to and acknowledged.”

Group members told us that:

- They valued our West Yorkshire Voice Coordinator coming to speak to their group members in person.
- They valued the way in which our Coordinator worked with and built relationships with their communities.

“George was flexible and worked well with the group giving honest explanations and took the time to return to give feedback on how the views of members were being used and shared.”

“George was very friendly and engaging with the members of the community. They helped them understand about the data that was being collected.”

Group members and those working in the WY ICB or West Yorkshire Health and Care Partnership told us that West Yorkshire Voice supported them to be linked into other projects and organisations.

“West Yorkshire Voice have been phenomenal at connecting me to wider health and care contacts and people with lived experience to help meet the aims of my work/service improvement. They are independent and I know I can trust them.”

For those working in West Yorkshire Integrated Care Board or local Health and Care Partnerships, people shared that West Yorkshire Voice has helped them hear from key communities due to the trusted relationships West Yorkshire Voice and local Healthwatch hold.

“WY Voice has provided a mechanism to engage with communities and organisations external to the scope of government originations. It has provided valuable insights that influence strategic work across the system and represented the voice, needs and wants of many communities and individuals. I hope this approach can remain, now it will be within the WYICB and not Healthwatch.”

“Having access to people with lived experience who trust WYV has helped us understand the needs of specific patient groups, and using their experience has helped us develop meaningful patient information.”

Sharing directly with the NHS

In our survey, we asked individual members how they felt about sharing their experiences directly with the NHS, given the changes to West Yorkshire Voice being led and delivered by the WY ICB (as opposed to Healthwatch as an independent organisation).

Out of 24 individuals who answered the survey, 16 said they do feel comfortable sharing with the NHS directly. Many of these people spoke about the importance of speaking to and influencing NHS services directly. A couple of people shared examples of groups they are involved in to share their experiences and others reflected on reasons why they feel more comfortable sharing their experiences.

“In the past I might have been wary about sharing feedback but now feel more willing, perhaps as a result of my involvement in Leeds Recovery College.”

“I have always found that health professionals understand and share many of the issues I have raised. I am sure this is helped that I have a comparable professional background!”

Four people said they do not feel comfortable sharing their experiences directly with the NHS:

“When I am in healthcare settings and in patient mode, I don’t feel very powerful, just grateful. Recently spent 28 hours in A&E with my Dad waiting for a bed when we were doing Friends and Family type feedback it really did not capture our experience. I find surveys limit your thoughts and you never know if results will be listened to. Healthwatch is better able to speak to authorities and make sure voices are heard.”

“Previously when I was critical of a service waiting list and my experience of the service I was made to feel very uncomfortable at all future appointments - even having an extra person in the room as a witness for the service.”

Two people were not sure, and two people did not answer this question.

Some people reflected that closing the feedback loop has the potential to work better if updates on what has changed comes directly from the NHS:

“I would feel my efforts were more worthwhile if there was more feedback to members from NHS management to inform us about the changes being made in response to our input.”

We also asked people working in a group or organisation, in the WY ICB or local Health and Care Partnership, how the people they support or work with feel about sharing with the NHS directly. Group respondents were generally positive about people they support sharing feedback directly and the importance of the opportunity for people to do so. However, one person shared their concerns with this approach:

“People often do not share feedback about health and care directly with the NHS as they are worried it will impact the care or treatment they receive, or that staff won't treat them well, because they will know who made a complaint. Independence is important. Many people also feedback that services don't get better if no one independent is reviewing feedback.”

Those working in the WY ICB or local Health and Care Partnerships were more mixed in responses with some finding that people were open and willing to share experiences directly, but others had experienced hesitancy from people they have worked with.

“Groups I have worked with are reticent because they feel the ICB do not provide feedback, do not listen, and do not provide accessible inclusive opportunities. Disability groups are very vocal about the lack of accessible options to feedback to health and care services; the Deaf community is very concerned about lack of access to services never mind just giving feedback. As a system we are poor at meeting accessible communication needs, and even poorer at enabling people to feedback accessibly. Our surveys are not accessibly designed, digital options are usually not accessible, and the methods we use do not engage with people in the way they need.”

“It is usually the similar voices of people willing to engage with NHS services, I am mindful that not all the insight is captured because of this.”

“Most people would know about PALS, but this seems to be a place to go with a complaint. There is definitely a power imbalance with having a feedback system embedded within such a large organisation that may seem intimidating. An independent body is more likely to achieve neutrality and avoid meeting the needs of the organisation over community’s needs.”

What could make West Yorkshire Voice better?

People suggested:

- Improving the way West Yorkshire Voice feeds back to the public about the difference people’s voices have made. This could be in the format of a ‘you said, we did’ or having more direct feedback shared by NHS decision makers.
- Hosting more regular opportunities for members of the network to connect and share feedback as a whole network e.g. through a quarterly meet up. This was both for individual members and those representing organisations.
- Improving the reach and diversity by hearing from more people from different communities. This aligns well with the ambition of West Yorkshire Voice to continually grow the membership and involvement of different communities. Communities mentioned were people with learning disabilities, trans and non-binary communities.
- Creating more opportunities for people to have their voices heard through in person and virtual workshops and surveys.
- Having or working with community champions.
- Taking a more member-led approach now that it has moved away from being led by an independent body.
- Surveys are not always the best form of engagement- there should be multiple ways of being able to give your feedback.

“I think that there is opportunity to develop the WYV so that it becomes more member led, more collaborative work, coproduction. It would be good to see more representation of different communities.”

Thank you

We would like to take the opportunity to thank everyone who has been involved in the development of West Yorkshire Voice. We would particularly like to thank the individual and group members of West Yorkshire Voice who have shared their time, experiences and feedback to help us to influence decision making in health and care across West Yorkshire.

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VOICE

Making a difference in health and care

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