



Healthwatch Listening Tour 2024/25: Summary Report

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Executive Summary

This Listening Tour report brings together the findings of engagement in Wealden, Lewes and the Havens and Hastings between May 2024 and May 2025.

The *Introduction* sets out the change in our approach over the last year, focusing on a wider area of East Sussex than in the past.

The *What We Heard* feedback is drawn from the three Listening Tour area reports that were published following engagement in each area.

This report identifies the differences and common themes in the areas that we visited, and makes five recommendations on these themes:

Accessing Primary Care: there is a need for multiple ways of accessing GP care.

Social Isolation: there is a significant role for social prescribing in tackling loneliness.

Social Determinants and Equality: there is a need for targeted support for young people, disabled adults, and carers.

Transport: there is a need for further co-ordination of public transport with the NHS and voluntary community schemes.

Health and Wellbeing: there is a need for targeted local initiatives to improve access to the community for people with reduced mobility.



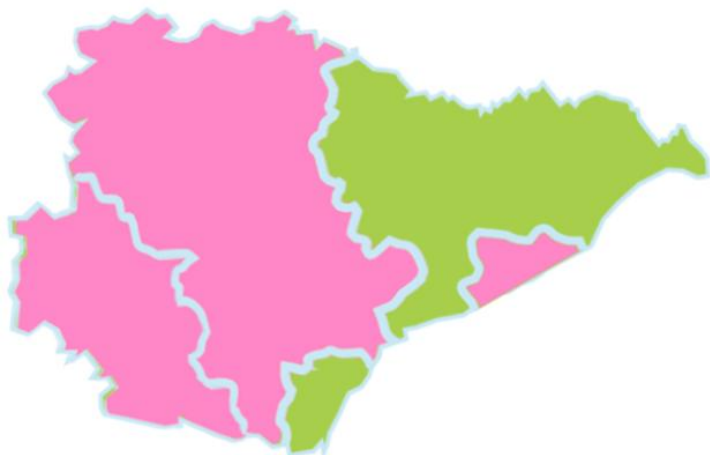
Introduction

Healthwatch East Sussex has previously undertaken an annual Listening Tour to a single part of East Sussex to intensively engage local people on their experiences of health and care. For 2024/25 we adapted our approach and visited three areas to increase our reach and understand the priorities of a range of local communities.

Throughout our Listening Tour we used a variety of activities to hear people's experiences of accessing and using health and care services. This included surveys, discussion groups, and listening events. This report provides a summary of our Listening Tour activity during 2024/25.

In 2024/25, we visited three areas of East Sussex including:

- Wealden District:
May 2024 – August 2024
- Lewes and the Havens:
September 2024 –
December 2024
- Hastings Borough:
February 2025 – May
2025



We visited a range of local groups, which included:

Wealden

Crowborough Community Café, Polegate Memory Café, Sussex Support Service, Uckfield Saturday Social, and Carers O'Clock.

Lewes and the Havens

Lewes Men's Shed, Lewes House of Friendship, Fitzjohn's Foodbank, Foundry Healthcare Reference Group, Our Songs, Our Stories Newhaven, and Newhaven Baptist Church Foodbank.

Hastings

Hastings Voluntary Action Age Friendly Coffee Morning, Care For the Carers Support Group, Parent and Carer Forum, East Sussex Recovery Alliance Drop in, and Listening Tour Coffee Morning.

Listening Tour Events

Listening Tour events were also held in each area at the end of each Tour phase.

Individual Surveys

We engaged **197** people throughout our tour, of which **49** completed individual surveys.

During our tour we used a simple feedback form that captured:

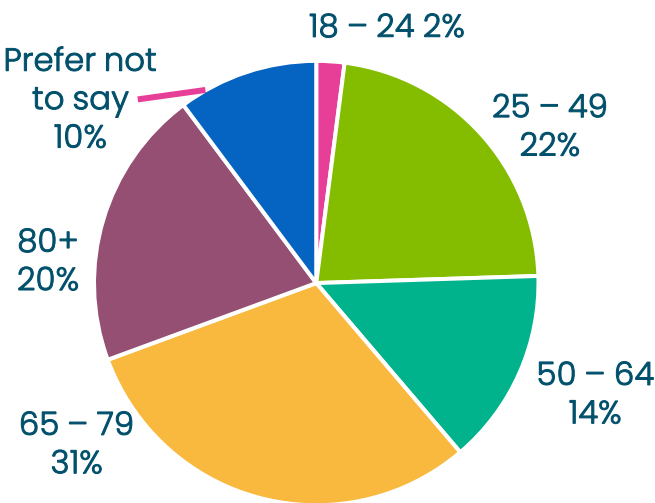
- Impacts on people's health and wellbeing
- Views and experiences of primary care
- The impact of social isolation
- Views on the social determinants of health
- Demographic details of survey respondents

Who completed individual surveys:

These figures are drawn from the 49 people who completed individual surveys during our outreach across our three areas.

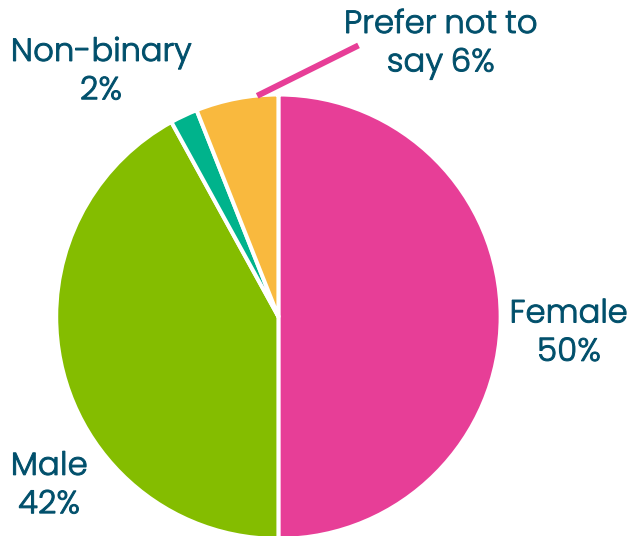
Age:

We spoke to adults of a range of different ages, but fewer people under the age of 24



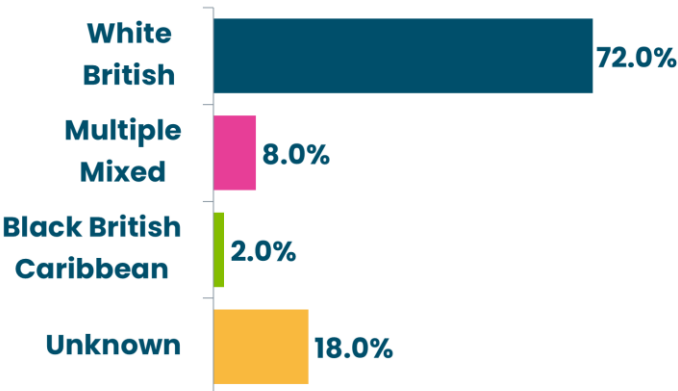
Gender:

The majority of those we surveyed were female.



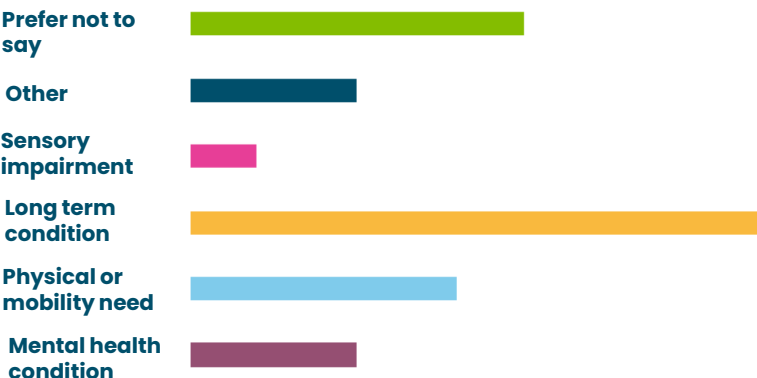
Ethnicity :

The majority of those surveyed identified as White British



Disability

Survey respondents reported a range of disabilities and long-term conditions



Feedback Centre and Information and Signposting

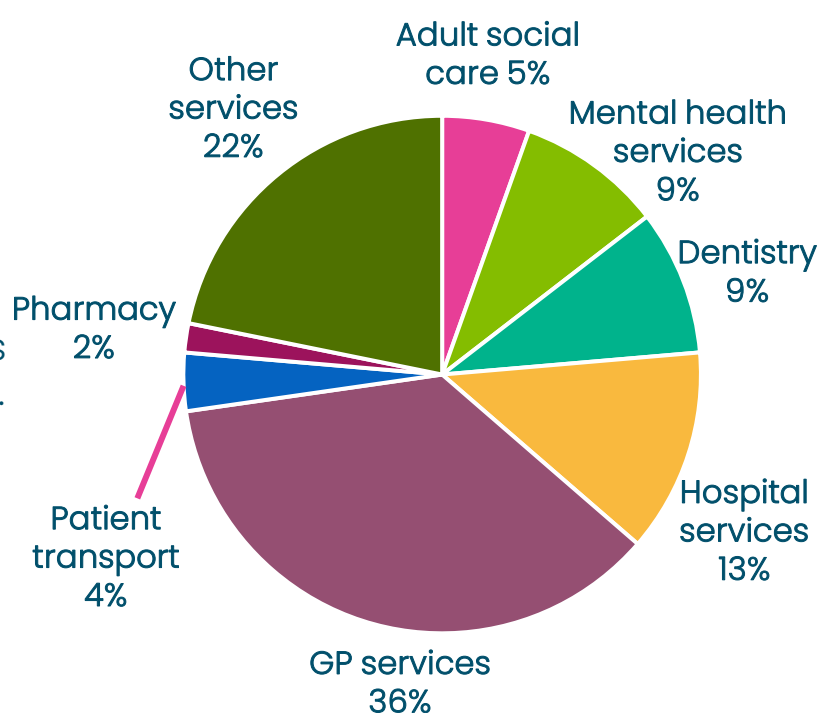
Healthwatch East Sussex offers an online Feedback Centre, allowing people in East Sussex to leave feedback about their experiences of health and care services. We also offer an Information and Signposting (I&S) service, which provides information to support people to navigate the health and care sector.

Wealden	Lewes & the Havens	Hastings
During our Wealden Listening Tour, we received seven pieces of feedback via our feedback centre, and 48 enquiries to our I&S service from people living in Wealden	During our Lewes and the Havens Listening Tour, we received one piece of feedback via our feedback centre, and 27 enquiries to our I&S service from people living in Lewes and the havens	During our Hastings Listening Tour, we received 13 pieces of feedback via our feedback centre, and 11 enquiries to our I&S service from people living in Hastings

Wealden

Those contacting our I&S service or completing a feedback form contacted us about a range of healthcare services. The most common service mentioned in feedback was GP services. A range of other healthcare services including dentistry, Adult Social Care services, and hospital services including A&E were also mentioned.

“Other” services included Vaccination services, the NHS app, and weight management services, among others.

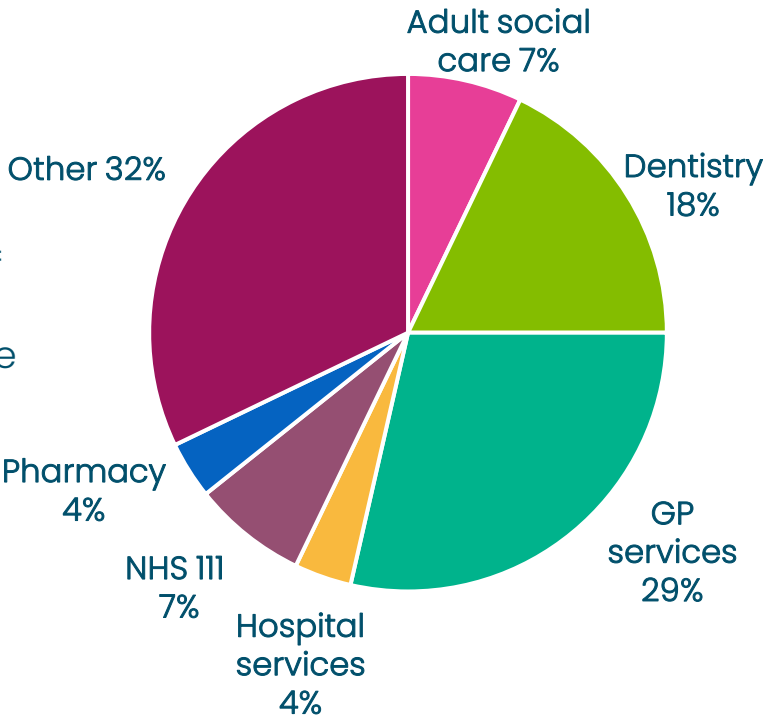


Feedback Centre and Information and Signposting

Lewes and the Havens

In Lewes and the Havens, the most common service mentioned in feedback was GP services. A range of other healthcare services including dentistry, NHS 111 and Adult Social Care services were also mentioned.

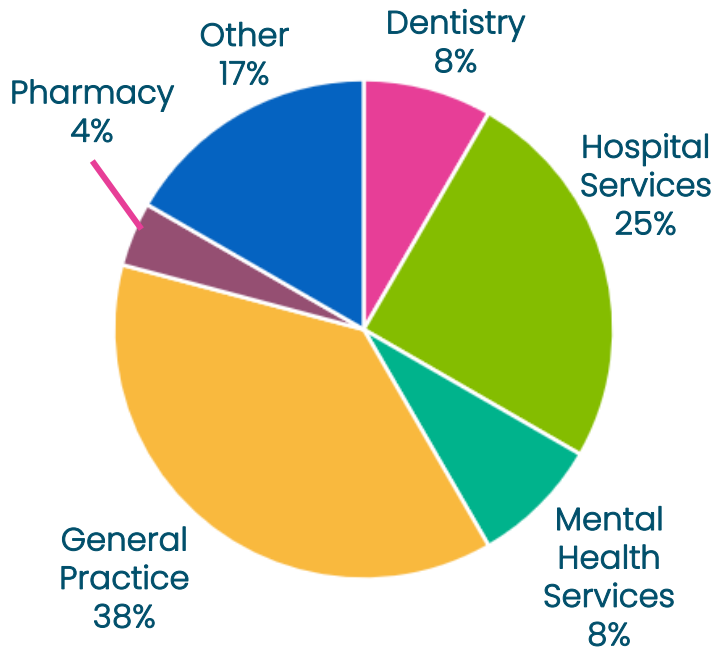
“Other” services included Lewes prison, continuing healthcare and audiology services.



Hastings

In Hastings, the most common service mentioned in feedback was GP services. A range of other healthcare services including dentistry, mental health services, and hospital services including A&E were also mentioned.

“Other” services included continuing healthcare and cuts to benefits, among others.



GP services were the most commonly mentioned service throughout all our Listening Tours, with one of the most common themes within this being finding it difficult to book an appointment and/or access GP services. Hospital services, dentistry, and mental health services were also regularly mentioned. Within this, a lack of NHS dentists, requests for help in finding appropriate mental health support, and feedback on hospital experiences were common reasons for contacting our I&S service. This feedback helped to shape our engagement with those we spoke to as part of our Listening Tour. Feedback on access to primary care was also reflected throughout the Tour.



Wealden

What we heard

Engagement in Wealden: What we heard

We engaged
15 people
in group
discussion

Health and Wellbeing

- There are quite a lot of activities going on for older people if they know where to find them.
- Carers particularly need a break from their caring roles and describe their wellbeing group as a “lifeline” to maintain care for loved ones.
- Half of older adults surveyed (50%) felt that income affects their health and wellbeing.
- The cost of living and housing impacted most on younger carers and people with disabilities.

Primary Care

- Most people surveyed continue to phone GP surgeries in the morning or visit face to face to book appointments.
- Some people (around 20%) are beginning to use online booking systems and the GP callback system.
- Whilst many people express a wish to see their GP face to face, over half of appointments (55%) are with other health professionals, mostly practice nurses or advanced nurse practitioners.
- Some people access Minor Injuries Units or Urgent Treatment Centres outside of Wealden if they can't get a same day or next day appointment.
- There was uniformly positive feedback on Minor Injuries Units and Urgent Treatment Centres.
- There is a lack of communication between health practitioners in Pembury Hospital in Kent and community practitioners in Wealden.
- There was positive feedback from carers on improvements to the ILL service in the last year, including booking GP appointments.
- There was positive feedback from carers on requesting repeat prescriptions online.



Engagement in Wealden: What we heard

Social Isolation

- A quarter of people surveyed (25%) reported that they 'never or did not often' feel connected to people in their community. A further 15% of people reported they 'sometimes' feel connected.
- The most common reason given for isolation was not feeling confident enough to access social groups. Health problems and lack of transport were also cited as reasons for isolation.
- Carers reported losing contact with friends who do not understand their caring role. Carers noted the difficulty re-establishing social networks when their caring role comes to an end.
- One carer noted that attending social groups enables them to retain their sense of humour and maintain their resilience. Carers made a lot of friends through attending wellbeing groups.
- Some people felt that better communication about community events would help them feel more connected to their community.

Social Determinants and Equality

- Half of older adults surveyed (50%) reported a hearing or sight impairment impacting on their ability to access health appointments.
- About a third (33%) of adults surveyed felt that having a disability impacted their ability to access healthcare.
- The welfare benefit system for working age disabled adults is complex and difficult to negotiate. People need support to understand how to complete the application for Universal Credit and the Personal Independence Payment from a mental health perspective.
- There is a lack of separate space for treating patients with dementia in Accident and Emergency at the Royal Sussex County Hospital.
- Carers reported they are unable to use the Carer Cards for discounted parking in hospitals outside of East Sussex, despite the NHS being pan-Sussex.

Wealden Listening Event: What we heard

Accessing Primary Care

- People who are working or have caring responsibilities cannot easily call GP surgeries at 8am to book appointments. Online booking systems are only as good as the capacity to triage requests for appointments.
- There is recognition that remote triage for primary care is a reality but presents a barrier for older people who still want to see a GP face to face.
- It is difficult for parents to request appointments online for teenage children due to Gillick competency and GDPR.
- People are unsure where to go if they cannot book a GP appointment. Some people access Minor Injuries Units in Wealden and further afield as they are easier to travel to than acute hospitals in Sussex.
- There was positive feedback about the 111 service, including the ability to triage people for GP appointments or hospital attendance.

Social Isolation

- There are a lot of activities for older people across Wealden, such as the Newick Lunch Club at St Mary's and U3A in Crowborough. Not all people want to meet with peers with the same long-term condition.
- Not enough men get involved in groups. There is a need for specific services based around activities, such as Men in Sheds and the walking group run by Family Hubs.
- Social prescribing could play an important role in connecting people up with activities that are of interest to them, using targeted social media.
- There are limited social activities for younger people, and cost is a barrier to participation. Intergenerational work through faith communities could help address inconsistent access across rural areas.

Social Determinants of Health and Wellbeing

- The cost of transport is a significant issue for some people living in Wealden. It is difficult for some people to get to health appointments or social activities, which impacts on their overall health and wellbeing.
- There are long waits for some services, such as the Child and Adolescent Mental Health Service (CAMHS). Some people can afford private treatment, but others cannot afford to pay.
- The digitalisation of access to primary care may improve over time, but risks creating additional barriers for people who struggle with technology.
- East Sussex Vision Support is training health professionals on the additional barriers to accessing support for people with visual impairments.



Lewes and the Havens

What we heard

Engagement in Lewes and the Havens: What we heard

We engaged
32 people
in group
discussion

Health and Wellbeing

- Transport to and from acute hospitals is a significant issue, including for hospital discharge. Voluntary organisations like Nevill Good Neighbours can make a difference if people know how to find them.
- The cost of transport around the district is a barrier to some people accessing social activities that would support health and wellbeing. The older person's bus pass is vital to support people getting out and about.
- It was recognised that keeping physically active, including getting outside and taking the dog for a walk is linked to mental and physical wellbeing.
- There was interest in accessible and themed walks on local history or nature. The label of a 'wellbeing walk' to tackle loneliness is unhelpful.

Primary Care

- There is higher use of online booking and consultation in the Lewes area following introduction of the Anima system by Foundry Healthcare. Patients are also able to phone or make appointments face to face.
- Some people find online communication more convenient. Not everyone is confident communicating online or by phone and some people (particularly some men) prefer face to face appointments.
- People using online booking and consultation are of all ages and tend to better understand they are being triaged when contacting the GP.
- There is anxiety about the sharing of personal data for the purposes of triage. There is frustration about sharing the same information repeatedly and not being able to make online enquiries out of hours.
- There were questions about whether GPs are triaging enquiries. There were some reports of patients visiting A&E or the UTC at Lewes Victoria Hospital because they could not access a GP appointment.
- There was positive feedback on the 111 service because this can facilitate access to GP appointments out of hours.
- There was positive feedback on the role of pharmacies in primary care but reports of vaccine shortages and a lack of local NHS dentistry.

Engagement in Lewes and the Havens: What we heard

Social Isolation

- People felt connected to their community through their social activity but many were aware of more isolated people who felt less confident accessing groups.
- Social prescribers in GP practices can play an important role in referring people to community organisations, such as Lewes Men's Shed and Care for the Carers, particularly where people are less confident.
- The Holiday and Food (HAF) programme supports the social inclusion of children who receive benefits-related free school meals.
- Many people really value the social dimension of community groups in supporting wellbeing. They provide a social space for adults to do things and chat. Sharing food is very effective in bringing people together.
- People want to do activities for fun without the purpose of improving health and wellbeing.

Social Determinants and Equality

- Some adults with communication challenges (dyslexia) or visual impairments find it difficult to use online systems.
- Availability of appointments, including NHS dental care, has the biggest impact on health. This is compounded by transport challenges for disabled people, or people without access to a car.
- Some older people, including those living with dementia, need a lot of encouragement to access healthcare, and their needs are not always met appropriately in acute hospital settings.
- There was anxiety about the loss of the Winter Fuel Payment for low-income people not eligible for Pension Credit.
- Some people accessing foodbanks found it difficult to connect with others due to the cost of living. People valued the social connection and empowering model of the foodbanks in Lewes and Newhaven.
- More public benches could support mobility-impaired people along walking routes. Lewes Men's Shed could help provide benches.

Lewes and the Havens

Listening Event : What we heard

Accessing Primary Care

- There is a risk that online access systems could potentially disadvantage people who would otherwise contact the surgery in more traditional ways, potentially resulting in unnecessary admissions to hospital.
- Havens Health is still a predominantly telephone-based appointment system. They feel they get more accurate information if they speak to patients to triage their needs.
- There is an NHS dentist in Peacehaven, but people are fearful about missing appointments and losing this service. The difficulty accessing NHS dentistry is about lists being closed to new patients.
- There was positive feedback from carers on the NHS app with managing prescriptions. The NHS app is more convenient and can be used to view the hospital appointment system.
- There is a huge variation between how each GP practice works, so it is impossible for other health practitioners to know what each one does.

Social Isolation

- Men are more likely to be socially isolated. They tend to have fewer friends but are also less likely to go to groups or reach out for support.
- Carers need regular respite, particularly with the closure of The Phoenix Centre in Lewes. Sit-in services are good, but don't last long and then the carer is left on their own again.
- There are social groups in Lewes and the Havens, including 'Soup and Social' at Denton Island Community Centre. Some people don't want to attend groups activities that are labelled for their 'wellbeing'.
- There are limited things for young people to do, particularly in Peacehaven where the Joff Youth Hub is currently closed.

Social Determinants of Health and Wellbeing

- Non-emergency patient transport is very limited. Some people struggle to get to appointments, and there are limited transport links to the Havens.
- The CTLA Community Transport service is expensive. Havens Cars is a voluntary service for local people, but they are low on drivers.
- There are significant socio-economic differences between Lewes and the Havens. There are also issues with digital exclusion, partly associated with poverty, but also because not everyone is confident with digital systems.
- The welfare benefits system is complex, and there is a culture of pride in the Newhaven area that means some benefits may not be claimed.



Hastings

What we heard

Engagement in Hastings: What we heard

We
engaged
63 people
in group
discussion

Health and Wellbeing

- Access to health and care services was a particular issue, with people reporting that it was difficult to get appointments, particularly with their dentist and GP practice.
- People valued the support provided by voluntary and community organisations in supporting their health and wellbeing, however shared that information about what support is available can be challenging to find, particularly for those who don't know what kind of support to look for.
- Transportation was a barrier for those relying on public transport, particularly for appointments outside of Hastings and/or first thing in the morning. People shared that buses can be unreliable, and that they are often by services told to book a taxi if they cannot get to their appointment by public transport, which for some is unaffordable.

Primary Care

- Feedback about GP services accessed was generally positive, however many people shared that they find it very difficult to get an appointment at their GP practice, leading to them giving up.
- People shared that online services are not accessible for those who struggle with or cannot use online services, making some people feel as though they are being "left behind".
- People highlighted the importance of being able to access services face to face, with this being particularly important for those who are older, have communication needs, and/or have multiple conditions.
- The timing of appointments was a barrier, with common feedback being that it is difficult to attend appointments which are early in the morning, or during working hours.
- Having a range of different methods to contact your GP practice was useful, with people sharing that how they contacted their GP practice depended on the urgency of their need. Many people said that they would call their GP practice if they needed a same-day appointment.

Engagement in Hastings: What we heard

Social Isolation

- People shared that they did not regularly feel connected to their community, with caring responsibilities and lack of confidence being the most commonly shared reasons for this.
- Throughout our engagement people shared how important the groups they attend are in supporting them to connect with others, with groups which connect them with people who have similar experiences to them (e.g., carers groups) being very valuable.
- Free activities that used to be available no longer exist, or if they do there is now a booking system and fee to attend. This means that people are not able to go out as much as they used to.
- People shared that there are not enough public toilets available, which can limit how much people are able to go out, with this being a particular issue for those who are older, have a health condition and/or have younger children.

Social Determinants and Equality

- A lack of understanding of different health conditions, the impact they have, and the kind of support that is needed is a barrier for people when attempting to access healthcare services. People shared they find themselves having to explain their health condition and what support they do and don't need, with some people saying that it would be easier for them not to disclose their health condition.
- The cost of living is continuing to impact people's health and wellbeing, with people sharing that they struggle to afford food and bills. One couple shared that throughout the winter they were only able to heat one room in their home, because it was too expensive to heat the whole house.
- Some people felt that they were not receiving appropriate support for their health conditions because they are older, with people sharing that they are sent away without having a proper investigation into their health issue.

Hastings Listening Event: What we heard

Accessing Primary Care

- It is very difficult to access primary care services, particularly GP and dentistry services. It was reported that some people with complex needs self-medicate with illegal street drugs.
- The use of technology, for example, being able to book appointments online, is very useful for younger generations. However, it should not become the only way to access services.
- Many GP practices have been developing their websites, making it easier for patients to find information and access different services. Many patients are not aware of what they are able to do on their practice's website, and more needs to be done to promote this.
- Many GP appointments are phone calls, but patients are only given a day and timeframe for the call, rather than an exact time. This is inaccessible for a wide range of people, who end up missing their appointment and having to rebook.
- Being a GP practice receptionist is a very important and skilled role, however, people shared that they did not feel that receptionists were always appropriately trained and were being asked to triage patients without the medical knowledge to do so.
- People are commonly advised to "talk to your GP" if you have a medical issue. This makes people think that they can only see a General Practitioner. It was suggested that this should change to "talk to your surgery", which may be more helpful.
- People shared that although patients may be sent for tests (e.g. blood tests) to look at what might be causing a medical issue, there is often no follow up unless the patient contacts the surgery after having the tests done.



Hastings Listening Event: What we heard

Social Isolation

- Organisations shared that although people can be signposted to community activities, attending groups alone is a barrier. People need someone who can attend groups with them, but this is difficult when the service cannot provide this support, and the person does not have a support network.
- Coffee and chat groups are useful but having an activity to do is very important for some of those who are socially isolated, as they may not feel comfortable attending a talking-based group..
- You have to pay for parking in many areas, and many car parks are removing their payment machines, pushing people to use payment apps. This prevents those who cannot access these services from going out.
- There are high levels of deprivation in Hastings, which can impact people's motivation to connect with others.

Social Determinants of Health and Wellbeing

- Many people can struggle with their health and wellbeing due to anxiety and other mental health conditions, which makes it difficult for them to reach out and access support. Some GP practices use withheld or unknown numbers, which is a barrier for people with social anxiety who may struggle with phone calls.
- Transportation is a barrier for people when attempting to access services or activities to support their health and wellbeing. Public transport is often unreliable, and often multiple modes of transport are needed, particularly to attend appointments outside of Hastings.
- Many places in Hastings require you to pay for parking, and there is a push towards using parking apps, with some areas removing their machines, meaning there is no option for cash payment. These issues create barriers for those who do drive but struggle to afford parking, and/or are unable to use digital payment methods.

What we heard: Quotes

"I always go in to make an appointment. I have a hearing impairment so I can't hear over the phone well and don't use internet."

"The phoning system at 8am is highly problematic. It excludes people who are already at work or have caring responsibilities."

"There is a difference between digital access and unlimited access, and digital access does not manage the unlimited demand from patients."

"Men's Sheds treat people the same, whatever their abilities, but we are not social workers."

"It has been a lifeline after losing my wife, providing friendship and company."

"The cost of living can make it difficult to get to important appointments."

"A bus route that I had relied on for many years ... was suddenly withdrawn. Now I can't afford to easily get to the doctors as I have to take a taxi."

"If you put more benches there, people will sit on them!"

Differences between Districts and Boroughs: Our areas

Throughout our Listening Tour, people shared a wide range of experiences and feedback on their local health and care services. Some of these themes were only mentioned in one area of our Listening Tour. These area specific themes are outlined below.

- In Wealden, people shared that there are lots of social activities in the area if you know where to look for these, but there are fewer social and wellbeing groups specifically for men.
- In some areas of Wealden there is a lack of outdoor seating, which can prevent those with mobility issues from being able to access green spaces and their community.
- Those we spoke to highlighted the large socioeconomic differences between Lewes and the Havens, with the suggestion that those in wealthier parts of the area may have better health and wellbeing overall due to better access to services being shared.
- Feedback from Lewes and the Havens suggested that lots of people in the area are now actively utilising online booking systems for GP appointments, and that this is generally working well. However, it was noted that during our Listening Tour in the area, not all GP practices had online booking systems available.
- In Hastings, people shared that the high levels of deprivation in Hastings have a great effect on local people's health and wellbeing. Many people shared that there is an issue with illegal drug use, with some people suggesting that people are turning to these drugs when they struggle to access the support they need.
- People shared that they felt that there is a lack of public toilets in Hastings, which can impact people's access to the community, particularly those who are older, have young children or have health conditions which mean that they need to be able to easily access a toilet.

While these issues were only mentioned in one area of East Sussex, this does not necessarily mean that this issue only affects that one area. However, it remains important to highlight that while lots of issues are relevant across East Sussex, some may be more important to those living in specific areas.

Common Themes

Accessing Primary Care

Accessing appointments at GP practices was the most common theme that people talked about during the Listening Tour. Participants shared that reaching and communicating with GP practices is challenging, especially for older people, carers, and people with disabilities.

- **Digital First**

Patients are encouraged to use digital tools to access appointments, but different people preferred different methods to make contact with their GP practice. Using technology is easy for some, but not for others.

Whilst younger people are generally more comfortable submitting information using a webform platform such as engage consult, digital exclusion is not simply about the age of patients. Some older people like the convenience of using NHS apps, whilst some younger adults struggle to access the technology due to income or disability.

The NHS app was highlighted as difficult to use, particularly for those with learning disabilities or other support needs. People with sight impairments and dyslexia were also struggling to use the Anima app. People with visual impairments found it harder to read messages sent by email or on the app if they use magnifying glasses. We heard that East Sussex Vision Support have visited GP practices to explain the additional barriers for people with visual impairments accessing primary care services.

More positively, some carers welcome the availability of online tools to order repeat prescriptions at a time of their convenience. This contrasts with the experience of calling GP surgeries by telephone to request an appointment to see a health professional. Carers don't have time to spend waiting on the telephone as they are looking after the person they care for.

- **Telephone Access**

There was mixed feedback on the use of the phone calls to request GP appointments. Some people preferred this form of access, whilst other people reported that this was the only way to make appointments, resulting in a rush at 8am. Some people said that if they visited their surgery face-to-face to request an appointment then they are directed to telephone at 8am.

There was frustration that some people making appointments by telephone were being asked to ring back the following day if all the appointments are taken in the morning. This frustration was shared with people using digital tools to access appointments if all appointments had already been booked for the day. An inability to book ahead, especially for less urgent issues, was often viewed as frustrating.

Common Themes

Accessing Primary Care

If people are unable to book same-day appointments for urgent health concerns then they may be unsure where to go. There was positive feedback about Minor Injury Units in Wealden, and Urgent Treatment Centres nearby because people were able to be seen the same day. There was positive feedback on the 111 service where people were able to access GP appointments through this service.

- **Triage**

There was a lack of awareness regarding the need to share information to enable the triaging of GP or primary care appointments. Some people reported that they do not like having to give sensitive or personal information to a receptionist and felt that they only ask to see a doctor when they need to.

Some struggle to communicate verbally on the phone, or express themselves using digital technology when requesting appointments, and this can impact their ability to access timely healthcare. Some reported delaying contact with their GP practice by phone as they were unsure what to say and had low expectations about getting an appointment.

People expressed concerns about the accuracy of the triaging system and who was making decisions about the prioritisation of appointments. It was identified that the introduction of the 'digital first' approach was not necessarily matched by the capacity of GP practices to triage all the information received and offer appointments to meet demand.

There was acknowledgement that receptionists at GP practices are doing a very difficult job, but there is a perception that receptionists are looking at a screen rather than speaking to the patients when recording information. Some carers reported that receptionists are more responsive to the needs of carers registered at the practice following input from Care for the Carers.

Social Isolation

Many people in rural areas reported feeling isolated on occasion. There are things going on if people are proactive in finding them, but this is dependent on the individual.

- **Lack of Confidence**

The biggest barrier to getting involved was lack of confidence and not feeling brave enough to make new friends. Carers reported it takes time to get used to being on your own when a partner is no longer living at home.

Common Themes

Social Isolation

Going to things on your own is a barrier, and some people say yes to activities suggested to them to please others but don't attend. People sometimes make excuses not to participate in activities when they lack confidence to socialise. The more isolated people are, the more important it is for them get out and go to activities, but the harder it is to find out about things and go.

- **People at Risk of Social Isolation**

We heard that not enough men get involved in social activities, and need more groups aimed specifically at them. Coffee and talking groups are not the right thing for everyone, and an activity can be more useful as it gives people something to do other than just talk.

NCT (National Childbirth Trust) runs groups for men in relaxed settings, including arranging walks and practical activities. Men's Sheds also offer a social space for men alongside woodwork and craft. They do not regard themselves as a mental health provider, but do offer activities for people referred by agencies, and try to treat everyone the same.

There are limited things for young people to do in rural areas, with few youth clubs and a lack of volunteers to run clubs. People are put off volunteering because of the responsibility of keeping people safe. Faith groups in rural areas are sometimes the only providers of youth clubs.

Young people are physically isolated if they do not have access to a car, and the cost of travelling by public transport can also be a barrier. This leads to a loss of confidence in some young people.

Some carers reported losing friends due to them being burnt out with their caring role. Friends do not always understand the impact of caring on carers' emotional wellbeing and physical wellbeing. Caring for people in crisis means people lose their friendships and so feel isolated without support. There is a need for ongoing support and connection rather than one-off activities.

- **Information and Social Prescribing**

There is a lack of awareness of services available to support people. People aren't aware of different formal and informal services until they are in crisis. A prevention approach should be in place before people get to crisis point. People felt the onus should be on front-line health and care practitioners to know what is out there and to refer people for early intervention.

The East Sussex Community Information Service (ESCIS) was highlighted as a valuable but under-promoted directory listing around 5000 local groups and services. People highlighted the positive role of social media in connecting people through Facebook groups and WhatsApp communities.

Common Themes

Social Isolation

Social prescribing can make a real difference to people's lives. There was positive feedback about proactive social prescribers finding activities that suit the individual and their interests. Social prescribing is often accessed through GP practices, which can make it harder for people to access this valuable support if they can't get a GP appointment.

It was reported that social prescribing could have a role in tackling social isolation and signposting people to appropriate activities in their locality. People felt that these services need greater investment and promotion.

Social Determinants and Equality

There are significant socioeconomic differences between Wealden, Lewes and The Havens, and Hastings. The Lewes and Wealden areas have different kinds of deprivation to other areas, with specific areas of rural poverty, and some people experiencing isolation.

There is a higher level of deprivation in the coastal communities of Newhaven and Hastings, with people reporting concerns about easy access to recreational drugs: *"it's easier to get weed than a doctor's appointment."*

Some forms of inequality cut across different age groups and levels of income. Digital exclusion is partly related to poverty but also reflects different skills and knowledge of digital systems. There is some evidence that people with digital skills can access healthcare more easily, as they know how to 'game the system' in order to get appointments faster.

• Welfare Benefits and Means Testing

The welfare benefits system is complex and we heard there is a culture of pride in the Newhaven area that means some benefits may not be claimed. Some people reported that the loss of the winter fuel payment would increase the risk of going into debt to stay warm, and this was a source of anxiety.

The benefit cap on families who have more than two children has a significant impact. The lack of affordable childcare makes it difficult for parents on low incomes to work or access social activities. We heard that the Holiday and Food (HAF) Scheme provides free childcare in the holidays. One mother told us she could reclaim 80% of the cost of childcare due to their eligibility for Universal Credit, which enables her children to take part in social activities.

People who are 'just about managing' are sometimes the most disadvantaged, as they are not eligible for means-tested welfare benefits and so find it difficult to afford discretionary spending.

Common Themes

Social Determinants and Equality

- **People at Risk of Inequality**

It was reported that young people were waiting years for input from the Child and Adolescent Mental Health Service (CAMHS). There were some reports people were paying for private health treatment due to the length of waiting lists for NHS care. While this enables some people to access healthcare, it reflects the difference in outcomes between those who can afford private care and those dependent on NHS treatment.

Older people accessing social activities across the county value the provision of a hot meal, as it's food they don't have to cook for themselves. Access to a good quality meal is important for people of all ages. Social clubs for older residents provide somewhere to come and meet other people, in a safe environment, have something to eat and use the toilet.

All carers reported their caring responsibilities made it difficult to access appointments, particularly for themselves, as they needed to be able to support the person they care for. All carers said that at times they have found it difficult to access healthcare when they needed it. One carer reported that their 'whole life' was controlled by their husband's additional needs.

Carers reported some poor experiences of hospital discharge, including inappropriate discharges from acute hospitals due to the pressure on the emergency department. This was exacerbated by poor communication between secondary health care and primary care. Carers living in East Sussex cannot use their carers cards for discounted parking in acute hospitals outside of the county, but appreciate the reductions provided locally.

- **VCSE Role**

Voluntary, community and social enterprise (VCSE) organisations play an important role in providing support to all but is most valued by people experiencing poverty and inequality. Churches and faith communities run youth clubs and dementia cafes. They also provide space for food banks or food partnerships to help feed people at risk of food poverty. We heard that there are pressures on the capacity of the VCSE sector due to the limited number of volunteers available to provide services.

Care for the Carers provide wellbeing groups across the county to give carers a connection to others, which they might otherwise find difficult. Where activities are held is important, as they need to be accessible and easy to get to.



Common Themes

Transport

Limited transport options contribute to difficulties accessing healthcare and social activities, especially when combined with other barriers such as low income.

- **Health Appointments**

People living in Wealden and Lewes have to travel significant distances to the nearest acute hospital. Infrequent bus services and poorly situated train stations require additional taxis, compounding accessibility issues.

The cost of living can make it difficult for some people to get to important appointments, particularly when the service is out-of-area. Some services (such as the lymphedema clinic in Eastbourne) are not accessible by public transport, and people have to pay for private taxis to get to them.

The national criteria for non-emergency patient transport are quite restrictive, and people reported that were unable to get to appointments as a result, particularly where they have to pay for transport from rural areas.

- **Social Activities**

Transport is a significant issue for people accessing social activities. The cost of public transport, including community transport services, can be a barrier, particularly where people have other priorities such as caring for children or their own health needs.

Limited transport has prevented some people from outlying areas coming to Lewes Men's Shed. There were reports of men who could not maintain their attendance at the Shed due to the cost or availability of appropriate transport across the district.

Mobility scooters can make a difference for some people with mobility needs, enabling them to access recreational and social activities in their localities. It is difficult for frail older people to get out and about in the winter, with some disabled people not wanting to take their mobility scooter out in the dark.

- **VCSE Role**

It was identified there is potential for the voluntary car schemes to play a bigger role in meeting the transport needs for local people, such as the Havens Cars and the Nevill Good Neighbours scheme. These VCSE services can provide assistance for people needing help attending appointments but rely on local volunteer drivers to have the capacity to help.

Common Themes

Health and Wellbeing

Keeping physically active, including getting out and about, was identified as the most important thing for health and wellbeing. This was very difficult during the Covid pandemic, but it was recognised that keeping physically active is linked to both mental and physical wellbeing. Older and disabled person's bus passes are vital to help people get out and about.

- **Activities for Fun**

Attending social groups enables people to retain a sense of humour and maintain their resilience in the face of challenges, including the cost of living crisis. People expressed interest in accessible and inclusive activities, such as themed walks in nature and local history.

Some projects, such as Health Walks, tend to attract people who are already healthy. People emphasised avoiding labels like "wellbeing walks". There is some value in having activities without having a specific purpose, or without being associated with a particular condition. Doing something just for the fun of it takes away the focus on people who are lonely.

It was reported there is a lot of recreational drug use in Hastings, and that it makes some people feel uncomfortable and unsafe when getting out and about. People suggested that there needed to be more action from the council and the police to make the town feel safe for everyone.

- **Caring and Giving Back**

For many carers the most important factor determining their health and wellbeing was the opportunity to have a break from their caring roles, and the opportunity to stop worrying about their loved ones. Carers reported having made a lot of friends through attending groups. Care for the Carers provide courses and activities that support carers to maintain their caring roles, including art courses and woodland walks. Giving something back helps people feel more connected to others.

- **VCSE Role**

Wellbeing Centres have a range of art and craft activity, information and advice, and other holistic activities for people with mental health challenges. There is a range of other VCSE services supporting social and emotional wellbeing in East Sussex, although their capacity is limited by the availability of volunteers and ongoing funding.

There was a call for more public benches to support people with reduced mobility along walking routes. Some Men's Shed groups have started work on making benches, and so there is potential for these groups to give something back by helping other people get out and about.

Listening Tour 2024/25

Recommendations

Recommendations for NHS Sussex and Primary Care Networks

1. Accessing Primary Care. The 'Digital First' approach to accessing GP appointments should be supported by alternative access routes for people who are digitally excluded, have sensory impairments, and other communication needs. NHS Sussex and GP practices should consistently clarify appointment options in line with Modern General Practice guidance, clearly communicate triage processes, and respond to the support requirements of people with additional needs.

2. Social Isolation Social prescribers who signpost people to social activities have a key role in tackling loneliness. NHS Sussex and Primary Care Networks should invest in social prescribing to help deliver the prevention agenda, including through Integrated Community Teams. The prevention strategies of local strategic partners in the Sussex Health and Care Assembly need to be aligned to tackle loneliness.

Recommendation for East Sussex County Council, District & Borough Councils

3. Social Determinants and Equality. Young people and those on low incomes, including disabled adults and carers, are most impacted by the increased cost of living. East Sussex County Council and local authorities should prioritise support for youth facilities, community assets such as Food Partnerships, and help for carers as identified in the East Sussex Carers Partnership Plan.

Recommendation for NHS Sussex and East Sussex County Council

4. Transport The cost and availability of transport can be a barrier to accessing health appointments and social activities. NHS Sussex should ask health providers to clarify transport options, including the low-income support scheme and where possible offer flexible appointment times. The East Sussex Local Transport Plan should factor in health and care, coordinating public transport with the NHS, non-emergency patient transport, and voluntary community schemes.

Recommendation for East Sussex County Council, District & Borough Councils

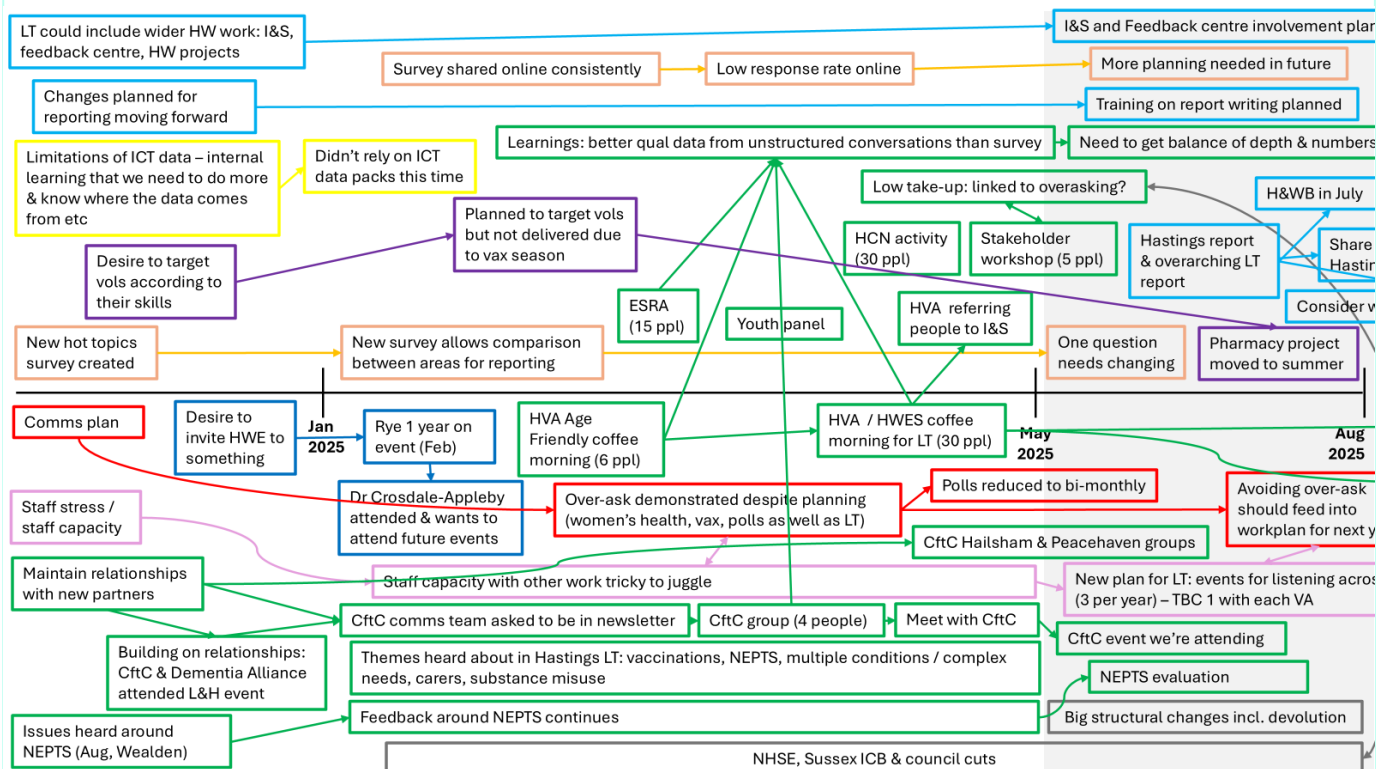
5. Health and Wellbeing. The 'What Matters to You' Adult Social Care Strategy identifies group activities, hobbies and volunteering as a priority. East Sussex County Council and local authorities should target support for local initiatives to improve access to the community for people with reduced mobility, including themed walks, community toilet schemes, and community seating.

Listening Tour 2024/25

Evaluation and Future Plan

Evaluation

Healthwatch East Sussex staff reviewed and evaluated the Listening Tour after each stage, using the Ripple Effect Mapping (REM) evaluation tool. We identified what we did, the intended and unintended impact of our activities, and the broad learning pathways to inform our future planning. The image below is taken from the Ripple Effect Mapping workshop following the completion of the Listening Tour in May 2025.



Future of the Listening Tour

Following evaluation of this year's engagement, Healthwatch will develop the Listening Tour further to include:

- Greater use of data from the Healthwatch Feedback Centre and Information and Signposting Service.
- A digital Listening Tour survey promoted throughout the year.
- Outreach to VCSE organisations across the whole of East Sussex.
- Two Listening Events, to feed into the developing workplans of Integrated Community Teams (ICTs)



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