



# Unlocking the power of people-driven care

## Public Meeting

Monday 4 August 2025, 12–3pm

Main Hall, Kingston Quaker Centre,  
Fairfield East, Kingston upon Thames, KT1 2PT



# Healthwatch Kingston Public Meeting 4.8.25:



# Healthwatch Kingston Public Meeting 4.8.25:

## Agenda Part 1

**12pm: Buffet lunch upon arrival** (30 mins) – All welcome

**12.30: Welcome and introductions** – Stephen Bitti, CEO Healthwatch Kingston

**12.45: Our year in numbers and making a difference**

**13.00: Making a difference in the community** Local voices and Healthwatch reports:

- Equitable access to participation (**Physically Disabled adults report**)
- Understanding health and care needs (**Early years and their families report**)
- Ensuring services acknowledge diverse experiences (**Bereavement gaps report**)

**1.30: Q&A session** – All

**1.45: Refreshment break** (15 mins)

# Healthwatch Kingston Public Meeting 4.8.25:

## Agenda Part 2

- 2pm:**    **Listening to your experiences** Local voices and Healthwatch community engagement:
- **Listening, learning, and leading:** How Kingston's voices have transformed safeguarding
  - **Youth Out Loud! podcasts:** Access to services for Disabled young people
  - **Improving quality of life in care homes:** Observing environments, mealtimes, activities
- 2.30:**    **Q&A session** – All
- 2.45:**    **Showcasing volunteer impact**
- 3.00:**    **Future priorities**
- 3.15:**    **Meeting close**

# Healthwatch Kingston Public Meeting 4.8.25:

## Welcome and introductions

### About us

Healthwatch Kingston upon Thames is your local health and social care champion.

From **Norbiton** to **Malden Rushett** and **everywhere in between**, we ensure that NHS and social care leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you find reliable and trustworthy information and advice.

“Today we will share some highlights and examples of our work in the [Healthwatch Kingston annual report 2024–2025](#)”

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## Our year in numbers and making a difference

We've engaged with more than **7,000** people to improve the quality of health and social care across Kingston. We currently employ **7** staff, and our work is supported by **66** volunteers who contributed **2,058** hours to our work in 2024-2025.

### Reaching out:



**1,048** people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

**5,774** people came to us for clear advice and information on topics such as **General Practice (GPs, nurses etc.)**, **NHS dentists**, **mental health support** and **safeguarding**.



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## Our year in numbers and making a difference

### Championing your voice:



We published 17 reports, 5 podcasts, 1 short film about the improvements people would like to see in areas like; **Bereavement support, care for Disabled people, hospital food, and community services.**

Our most popular reports this year were our series of our 11 Enter and View reports on residential care.

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## Our year in numbers and making a difference

### Statutory funding:



We're funded by **the Royal Borough of Kingston upon Thames**. In 2024-2025 we received £122,000, which is **the same as** last year.

In 2024-2025 we employed **4 staff** (2.6 full time equivalent) through £122,000 core statutory funding. With our additional income we also employed **3 additional staff** (1.8 FTE).



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## Our digital reach

Over the year, we have continued to expand and improve our digital information offer and expanded our presence across digital platforms to reach more people in Kingston.

### A hub for information:



Between 1 April 2024 and 31 March 2025, **16,557** different people viewed different pages on our website **36,763** times.

People visited our website to read our reports, learn more about our insights, find information and advice, and to connect with us to share their stories.

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## Our digital reach

### Creating channels of conversation:

We added two channels to our social media offer to raise awareness of our work with a broader audience. LinkedIn and BlueSky now join Facebook, X and Instagram.



On Facebook, we connected with communities directly to share information, reaching a total of **39,881** unique accounts.

On social media we started conversations about changes to services, shared vital information about health and wellbeing and championed local stories.

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## Our digital reach

### Keeping local people in the loop:



We sent out **14 e-newsletters** that were opened **6,108** times. Our newsletter allows us to connect with local people directly to ensure they are kept informed of service changes, get the opportunity to have their say, and understand the impact their experiences have.

See 'A year of making a difference' handout

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## Making a difference in the community

Local voices and Healthwatch reports:

1. Equitable access to participation ([Socially isolated, physically Disabled adults report](#)) – **Karen Dempster and Candy Dunne**
2. Understanding health and care needs ([Early years and their families report](#)) – **Kezia Coleman, Rosie and Candy Dunne**
3. Ensuring services acknowledge diverse experiences ([Bereavement gaps report](#)) – **Stephen Bitti and Scott Bacon**

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## Equitable access to participation

### 1. Physically Disabled adults report – Karen Dempster and Candy Dunne

#### Working toward equitable access to participation



**Hearing personal experiences and their impact on people's lives helps services better understand the issues people face.**

Collaborating with the Kingston Centre for Independent Living to understand the **health and care needs of socially isolated, physically Disabled adults**, we heard about barriers to inclusion, such as transport, accessibility, and lack of support. Reinforcing the need for equitable opportunities to connect, participate, and feel part of the community, we shared our recommendations for change with key decision makers.

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## Physically Disabled adults report – **Key themes**

- **Access to NHS and social care services**
- **Transport and mobility**
- **Physical accessibility and infrastructure**
- **Mental health and social isolation**
- **Inclusive and accessible social activities**
- **Information and digital exclusion**
- **Representation and involvement:**
  - Disabled residents wanted to be involved in shaping local policy and service planning, and there was a recurring concern that decisions were being made without the voices of Disabled people.

**See key themes  
handout provided for  
more information**



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## Physically Disabled adults report – Recommendations

- **Service delivery and coordination**
- **Accessibility and infrastructure**
- **Information and communication**
- **Inclusion and representation:**

**See recommendations handout  
provided for more information**

11. Ensure Disabled people are involved in all stages of service design, especially in major public planning.
12. Embed cultural competence and anti-discrimination training in all frontline services.
13. Recognise the impact of social isolation on mental health and invest in community-led befriending, peer support, and inclusive events.

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## Understanding health and care needs

### 2. Early years and their families report – Kezia Coleman, Rosie and Candy Dunne

#### Understanding the needs of local people



**Championing the voice of local families, we are working to ensure services are shaped by people's needs.**

Working collaboratively with Kingston Voluntary Action, Healthwatch Kingston ran a survey and community engagement to understand the **health and care needs of under-5s and their families**. Revealing the persistent challenges families face, our report findings are informing the development of community services in Kingston and across south west London.

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## Early years and their families report – **Key findings**

- **Mental and physical health impacts:** Many parents reported emotional strain, isolation, and exhaustion. 59% experienced some mental health impact, while 50% reported physical health effects.
- **Access challenges:** Long waits for speech therapy, child and adolescent mental health services (CAMHS), special educational needs and disabilities (SEND) assessments, and autism diagnosis were common. Families had to organise, manage and coordinate the care their children were receiving.
- **Service experiences:** While some praised GPs, dentists, and children's centres, others faced issues with referrals, dismissive attitudes, and inconsistent care.

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## Early years and their families report – **Key findings**

- **Child wellbeing concerns:** 20% expressed worries about emotional, behavioural, or developmental issues, with many facing barriers to timely support.
- **Financial strain:** A third of families reported struggling financially, particularly single-parent households.



Based on what **100 people** told us, Healthwatch Kingston has created **9 recommendations** to the NHS, Kingston Council and other decision makers, requesting they consider these during future service development opportunities.

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## Early years and their families report – **Recommendations**

1. **Integrated care coordination** for families managing multiple health and care pathways.
2. **Prioritise early years family mental health** – perinatal, postnatal, and childhood trauma support (such as ensure trauma-informed care for birth and postnatal health – listen to mothers).
3. **Improve wait times** for speech and language therapy, CAMHS, SEND assessment, and autism or ADHD diagnosis.
4. **Ensure inclusive, culturally sensitive services**, especially around dietary, faith, and parenting norms.

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## Early years and their families report – **Recommendations**

5. **Expand accessible children's centre provision**, especially in 'deprived areas' (such as Norbiton, Chessington and Hook and Tolworth).
6. **Ensure continuity of care** where possible to ease emotional burden on families.
7. **Invest in staff training** about neurodiversity, disabilities, and long-term conditions.
8. **Include parents in decisions about their child's care** so they don't feel dismissed.
9. **Strengthen communication systems** between services (such as, one point of contact per family).

Healthwatch Kingston will liaise further with our Advisory Group members to explore how, what local people told us and then we will publish an additional report on the outcome of our discussions.



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## Ensuring services acknowledge diverse experiences

### 3. Bereavement gaps report – Stephen Bitti and Scott Bacon

#### Ensuring services acknowledge diverse experiences



**Listening to the diverse needs of local communities, we have highlighted the need for bereavement services that are compassionate and inclusive.**

Building on earlier findings, we worked with partners to engage underrepresented groups through a series of community workshops, to better understand experiences of bereavement services and support across south west London. New findings from our 'gaps' workshops highlight the importance of acknowledging diverse grief experiences, addressing systematic barriers, and ensuring long term support.

## Dr Catherine Millington-Saunders

### End of Life Care Clinical Lead, South West London:

"The Bereavement Services and Support: Gaps Workshops **community engagement report** is rich in insight, deeply human and incredibly well structured. It's clear how much care and expertise has gone into every element. It is a grounding piece of evidence for influencing policy, commissioning, and shaping local provision – an **exemplar** for putting people with lived experience at the heart of bereavement care and support. The range of voices represented is both powerful and moving and the way the report elevates underrepresented experiences, especially through the quotes, gives it real emotional resonance. The attention to cultural nuance, stigma, and practical challenges in accessing support is wonderful. I particularly appreciated the recognition of grief that stems from losses beyond death: identity, role, home, and relationships and how this opens the door for more inclusive services."

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## Bereavement gaps report – Key findings

- The South West London Bereavement Services Community Engagement initiative revealed a critical need for expanded, inclusive, and well-publicised bereavement services.
- The findings highlight the importance of acknowledging diverse grief experiences, addressing systematic barriers, and ensuring long term support.
- As one participant (from the workshop facilitated by Dignitate) powerfully stated:

***"Grief doesn't just affect your heart – it affects your whole life.***

***Support needs to reflect that."***

**See handout provided for considerations**

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## YOL! bereavement film – Key finding

- **Engagement with young people was an identified gap** in our initial pilot bereavement work. Funded by the **Royal Borough of Kingston upon Thames, Community Resilience Fund**, Youth Out Loud! (YOL!) created a film which introduces young people to bereavement / grief services and support.
- **YOL!** is a group of young people helping to improve our local health and social care services. Working with Healthwatch Kingston and using their voices to make health and care services better for young people.
- **75%** of the **57 young people** we engaged with did not know what **bereavement** meant. **Only 25% understood the term**, which is why YOL! included the term, **grief** to the beginning of the film.

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## Part 1 – Q&A session

*over to you...*

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## Refreshment break

15 minutes.





# Healthwatch Kingston Public Meeting 4.8.25:

## Agenda Part 2



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  - **Improving quality of life in care homes:** Observing environments, mealtimes, activities
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- 3.00:**    **Future priorities**
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# Healthwatch Kingston Public Meeting 4.8.25:

## Listening to your experiences

Local voices and Healthwatch community engagement:

1. **Listening, learning, and leading:** How Kingston's voices have transformed safeguarding – **Stephen Bitti and Scott Bacon**
2. **Youth Out Loud! podcasts:** Access to services for Disabled young people – **Julie (YOL!) and Scott Bacon**
3. **Improving quality of life in care homes:** Observing environments, mealtimes, activities – **Julie (Enter & View) and Jill Prawer**

# Healthwatch Kingston Public Meeting 4.8.25:

## Listening, learning and leading

How Kingston's voices have transformed safeguarding – **Stephen Bitti and Scott Bacon**

### Seven important years, listening, learning, and leading: How Kingston's voices have transformed safeguarding

**We created the London Safeguarding Voices (LSV) initiative with London leads. Learning from our LSV work has shaped our development of the Kingston Safeguarding Voices group.**

During 2024–2025, Healthwatch Kingston amplified the voices of people with lived experience to help shape safeguarding services in Kingston. Through Kingston Safeguarding Voices (KSV), we worked with residents, advocates, and professionals to make safeguarding more transparent, accessible, and person-centred.



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## Key things we heard:

800+

- People have informed our London and Kingston safeguarding voices learning.
- **KSV** wanted an **Easy Read** Annual Report to support accessibility.
- Also wanted more **public information** on how to stay safe in Kingston, how to report safeguarding concerns and what happens next.
- **Safeguarding service users** valued early involvement of their family members and **timely communication**.
- Also shared that **Advocacy** was important to them to feel supported and heard.



### What difference did this make?

- Healthwatch Kingston regularly updates the Board, making sure KSV continues to guide decisions.
- The Board has agreed KSV co-produce a visualisation of the safeguarding journey, so that people can easily understand the safeguarding process.



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## Youth Out Loud! podcasts

Access to services for Disabled young people – **Julie (YOL!) and Scott Bacon**

## Youth Out Loud! breaks silence on grief, disability, and access to services

**During 2024–2025, we continued to empower young people through Youth Out Loud! improving access to health and care information via peer-creative, youth-led communication.**

Young people aged 13–17, have used digital platforms to raise awareness of health services, and explore difficult topics from grief to self-harm. YOL! Has kept young people aware and involved. It has supported them to make informed choices about their health and ensures their voices shape services.

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## Youth Out Loud! podcasts and other work

### What did we do?

- Created a **short film** on *bereavement and grief*, shaped by feedback from the Chessington Youth Group, to raise awareness of a topic not covered in the national curriculum.
- Spoke to young Disabled people and their families to produce 5 **podcasts** and reports highlighting everyday challenges to accessing the care they need and the impact on their lives.
- Set up a young people's "**Find Help**" page on the YOL! website, covering **cancer, bereavement and grief, online safety**, and **student healthcare**.
- Shared health tips and service signposting by and for young people across **social media**, covering mental health, alcohol use and sun safety.
- **We also asked young people what health topics** they would like to know more about and how they would like to hear from us.





## What difference did this make?

Taking a compassionate approach to the issues young people face, through YOL! we gave young people a platform to speak for themselves, signposted them to trusted support and empowered them to be involved in decision making processes.



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## Improving quality of life in care homes

Observing environments, mealtimes, activities – **Julie (Enter & View) and Jill Prawer**

**We involve local people as Authorised Representatives to understand residents, families and friends' experiences of care, highlighting good practice specific areas for change.**

Across 10 months, we completed **14 Enter and View** visits to **10** residential care providers. We spoke to **119** people about their experiences and collaborated with local partners to ensure the quality of the residents' care. We observed the **living environment, mealtime experiences** and **activities** provided to give feedback that improved local peoples' quality of life.

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## Improving quality of life in care homes

### Key findings:

**Average 8**

#### **recommendations per provider on environment**

In homes where residents seemed most content the manager had good communication skills and was seen as accessible and available by the residents, relatives and the staff.

**Average 6**

#### **recommendations per provider about residents' mealtime experiences**

In homes where residents seemed most content there were sufficient staff at mealtimes, giving them time to chat to residents and build relationships.

**Average 4**

#### **recommendations per provider about activities in the home**



In homes where residents seemed most content there were sufficient staff at mealtimes, activities/wellbeing coordinator(s) who knew the residents well and were able to give 1:1 attention to residents, including those who were bedbound, and organise varied activities.

### What difference did this make?

Our local partners ensure all recommendations are acted upon and any that are outstanding have action plans, which drive improvements in the quality of care across the borough.

The Care Quality Commission has agreed to explore a joint learning event and requested a Regulatory Coordinator shadow our joint quarterly meetings.

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## Part 2 – Q&A session

*over to you...*



# Healthwatch Kingston Public Meeting 4.8.25:

## Showcasing volunteer impact

### At the heart of what we do

From finding out what residents think to helping raise awareness, our volunteers have championed community concerns to improve care.

"I heard about Healthwatch Kingston's amazing work through a family friend. I feel passionate about taking an active role in local affairs and making a difference within the local community, ensuring others don't needlessly suffer like my late mother.

My involvement with Healthwatch Kingston has enabled me to have direct experience after getting a postgraduate diploma in Human Rights from Kingston University."

I find the role rewarding when we identify what works well... It has developed my confidence and allowed me to be a positive voice for the vulnerable. I believe Healthwatch Kingston is an important safety net for users of health and care services in Kingston." (Julie)



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## Showcasing volunteer impact

"We really enjoy going to the All-Age Learning Disability Partnership Board meetings, to make sure people with learning disabilities have the chance to have a say about things going on in the community.

We support Healthwatch Kingston with the work that they do at the Partnership Board.

The Partnership Board is a way for people to attend and have a say about people with learning disabilities. We would really like it for people with learning disabilities to attend and have their say about the subjects that are talked about."  
**(Katy and Mario)**



# RIP Graham Goldspring

Please join me in a minute of quiet reflection



**Celebrating Heroes from our local community: Graham**

**"Volunteer work for Healthwatch Kingston gave me a purpose and focus after I had retired. I brought in my experience in data evaluation and scientific method from my career as a science teacher. I have always felt valued in everything I have contributed over the years since I joined Healthwatch about 15 years ago when it was another name. I was proud to be one of the volunteers who were asked to represent Healthwatch Kingston at the 70<sup>th</sup> birthday service for the NHS at Westminster Abbey in 2018. It has been so rewarding that I was part of a team working towards improving patient experience and particularly for those living with dementia."**



Graham,  
Healthwatch Kingston  
Hero 2023-24



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## Future priorities

### Our top three priorities:

**Since April 2025, we have kept reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.**

We will continue to work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

**You can check out our planned seven key work areas for 2025–2026 on the next page, but our top three priorities are now:**

1. Review Healthwatch Kingston community engagement data from the past 5-years to explore what insights and cross-cutting themes exist.
2. Convene a strategic review of youth engagement work in Kingston to explore collaborative initiatives.
3. Ensure required local Healthwatch functions transition smoothly during transformation.

**See 'Our plans for  
2025–2026'  
handout for more  
details about our  
seven work  
areas.**

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# Carers Crisis Prevention and Support Task & Finish Group (TFG)

Aim: Planning for future care needs and preventing carer crisis

Actions:

- Meet every 4/5 weeks but this is flexible and subject to change
- Research and review the local offer of support for carers in Kingston, categorised as providing **Crisis Prevention, Crisis Planning and Crisis Support.** (undertaken)
- Identify and analyse gaps in our local offer and think of ways to address these, with a particularly focus on contingency/ emergency planning (underway)
- Provide recommendations for the All Age Kingston Carers Board to review on how to close the gaps in our offer
- Raise awareness of the local offer amongst partners and carers
- Please contact [marci.whittingham@kingston.gov.uk](mailto:marci.whittingham@kingston.gov.uk) for further questions/ if you would like to join the group



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**Thank you**

**From all of us at**

**healthwatch**  
Kingston upon Thames

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