

# What we heard about health and care

January to March 2026



# Contents

<b>Introduction .....</b>	<b>2</b>
<b>Access to care .....</b>	<b>4</b>
<b>Waiting times .....</b>	<b>7</b>
<b>Quality of treatment.....</b>	<b>11</b>
<b>Caring, kindness, respect and dignity .....</b>	<b>14</b>
<b>Communication.....</b>	<b>17</b>
<b>Conclusion .....</b>	<b>20</b>

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**What we heard about health and care, January to March 2026**

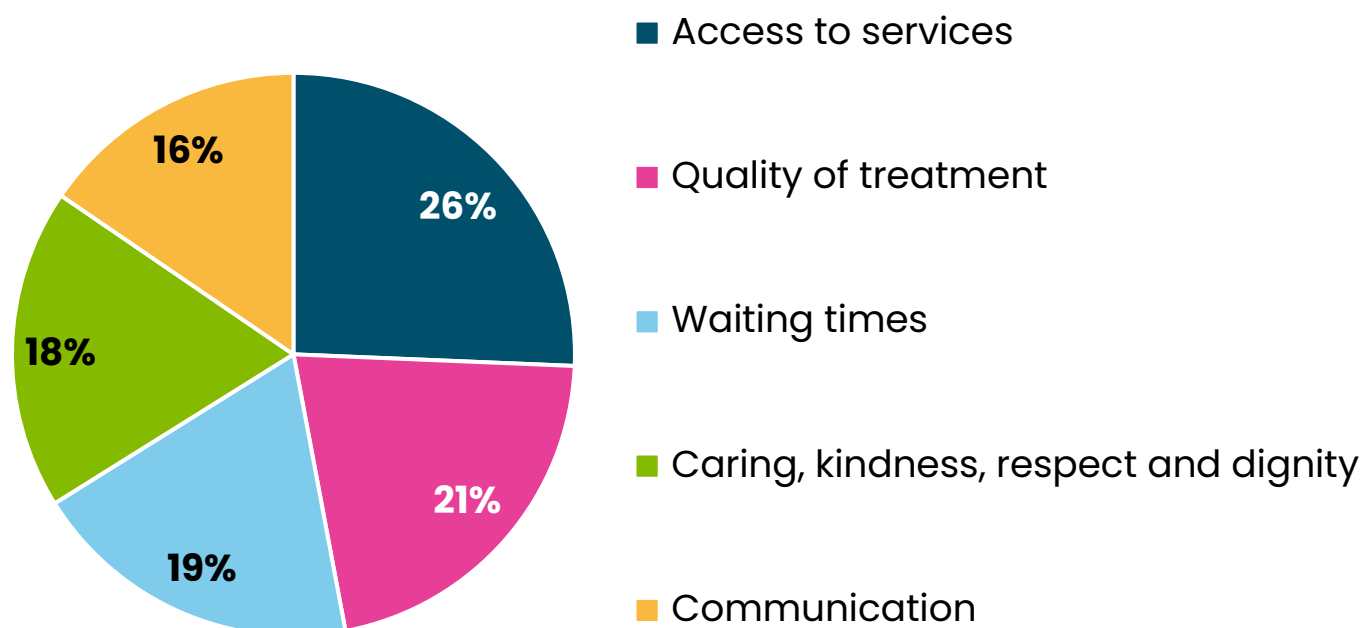
# Introduction

At Healthwatch North Yorkshire, we listen to what people tell us about their experiences of health and care. That includes what's working well, what isn't, and where things need to change.

This report brings together what people shared with us between January and March 2026. It gives a snapshot of what it feels like to access and use care across the county right now, and highlights where there are patterns or risks that shouldn't be ignored.

Over these three months, 221 people got in touch with us directly, through our website, phone, email and social media. We also spoke to another 226 people at events across North Yorkshire. This is just part of what we hear, and does not include feedback gathered through our wider projects, surveys or care home visits.

## The main issues people raised about health and care



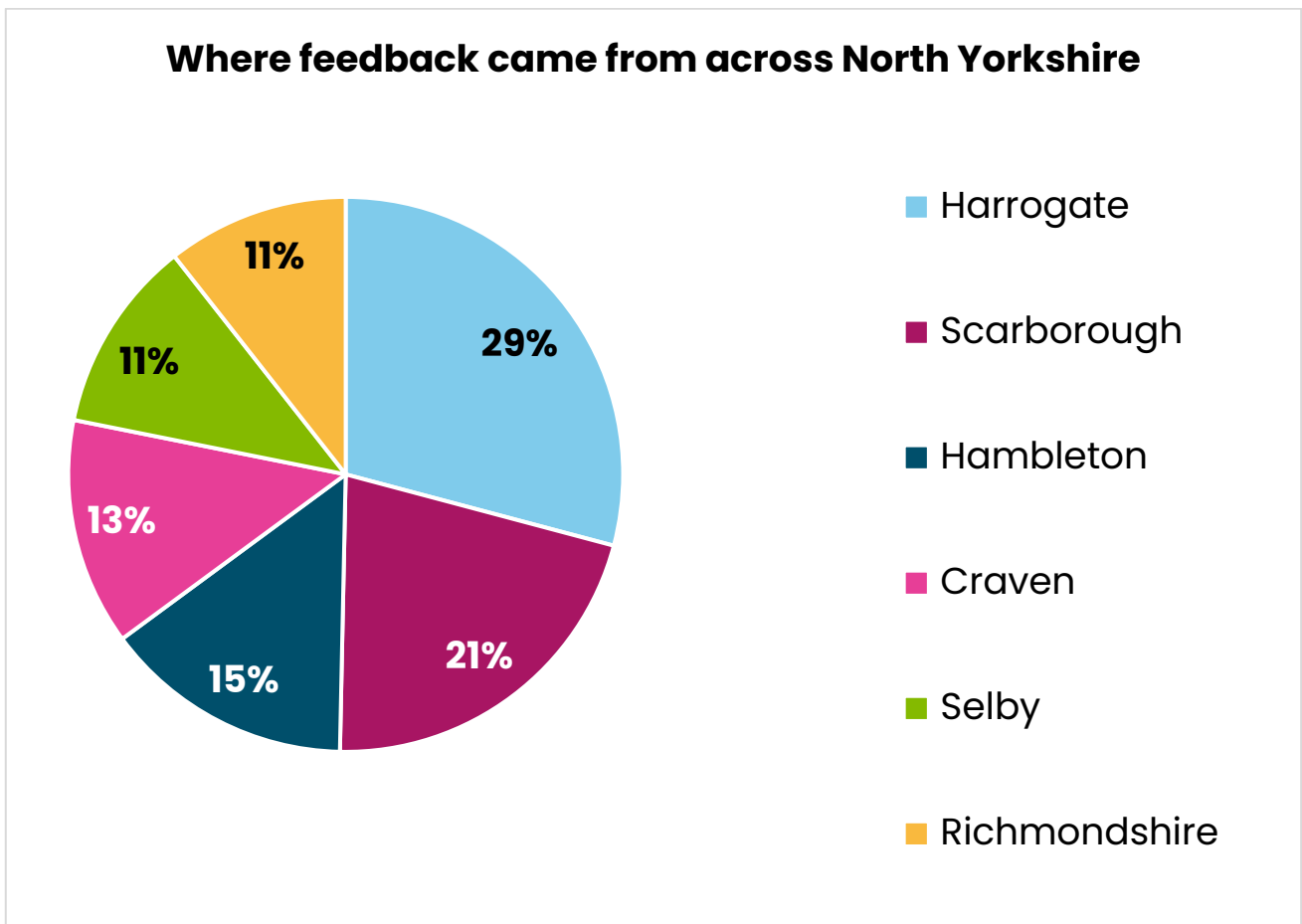
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Five issues came up time and again:

1. Access to care
2. Waiting times
3. Quality of treatment
4. Caring, kindness, respect and dignity
5. Communication

We've set these out in the report, along with what people told us and why it matters in practice.

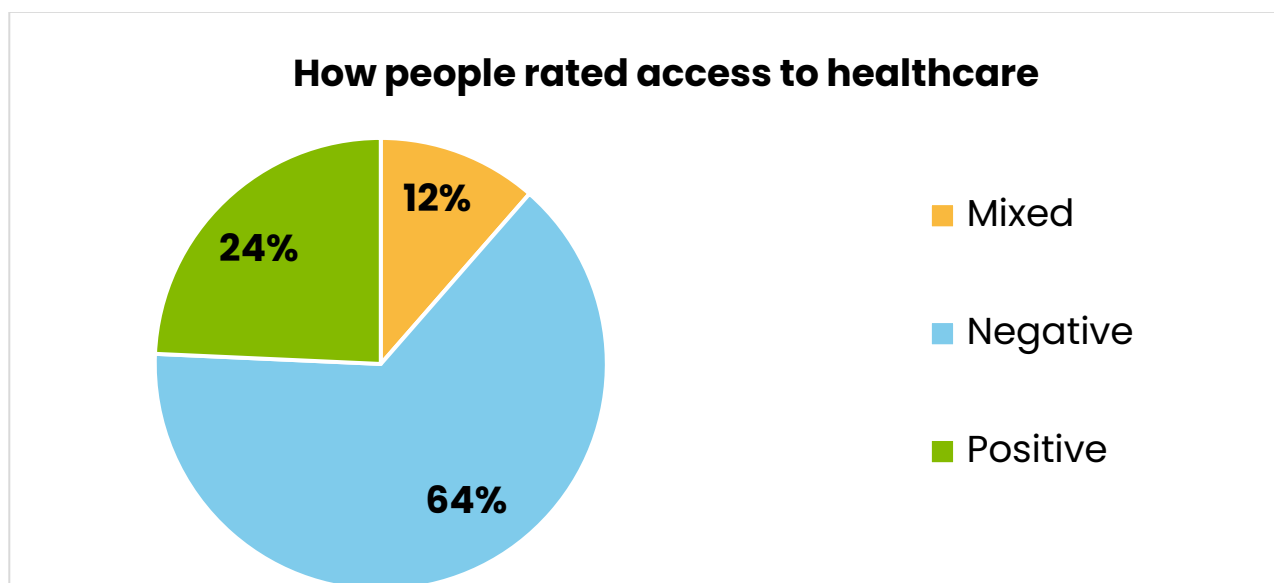
Most feedback came from Harrogate, followed by Scarborough, Hambleton and Craven. We also heard from people in Selby and Richmondshire. Every conversation helps build a clearer picture of what's happening across the county.



# Access to care

**Simple things like booking appointments, travelling to care and knowing where to go are still getting in the way for many people.**

Getting care when it is needed continues to be one of the most common issues people raise with us. This includes appointments with local doctors, hospital referrals, mental health support, maternity care, patient transport and dental care. While some people described being able to access care without difficulty, others spoke about barriers that made it harder to get the help they needed.



A common issue was being asked to go online to arrange appointments, which worked well for some people but created an immediate barrier for others. One person told us **“My son struggles to be online, and they told him he can only book an appointment through an app. He has also tried ringing, and they tell him the same thing,”** which shows how relying on online tools can exclude people who are not confident using them or do not have easy access.

People also described difficulties with the basics, such as registering with a local doctor or knowing where to go for help. One person explained **“I have been struck off the patient register, and now I haven’t got a doctor,”** highlighting how gaps in registration or communication can leave people without access to care altogether.

Others spoke about long and sometimes confusing online forms, which asked for detailed information that was not always easy to find or understand.

For people living in rural areas, distance and transport added another layer of difficulty. One person told us **“I live on my own. The last time a friend took me to an outpatient hospital appointment, he gave up seven hours of his day,”** which shows how attending appointments can depend heavily on support from others. Public transport does not always align with appointment times, and without a car, people can struggle to get to where they need to be.

Transport challenges were made worse for those who were not eligible for patient transport. One person explained **“I can’t afford to pay for transport, and no one was available to give me a lift. I don’t think I will be able to go to any appointments,”** highlighting how financial and practical barriers can prevent people from attending care.

Access to dental care was raised repeatedly as a significant issue. People told us they had tried for years to find a dentist offering care under the NHS without success. One person said **“I have tried endlessly for eight years to get my partner a dentist, and all I get told is private only,”** which reflects the scale and persistence of the problem.

People also described situations where they were directed to care outside their local area or where postcode boundaries affected what support they could access, which made it harder to get help that was both appropriate and practical.

Overall, what people told us points to a wider issue. Care may exist on paper, but that does not mean it is easy to access in practice. Having to go online to arrange appointments, combined with distance, transport challenges and complicated processes, can make it much harder for some people to get the care they need.

**For some people, getting care is not just about booking an appointment. It is about whether they can get through, get there and be seen at all, and when this depends on someone’s circumstances rather than their needs, it stops being fair.**

**These experiences are reflected in what people told us:**



**“The website pages at Harewood Medical Centre were not easy to use and asked for information I did not have to hand, such as NHS and patient record numbers.”**



**“My GP and most of the admin staff at Bramham Surgery are lovely. The issue is trying to get a same day appointment.”**



### **What this means**

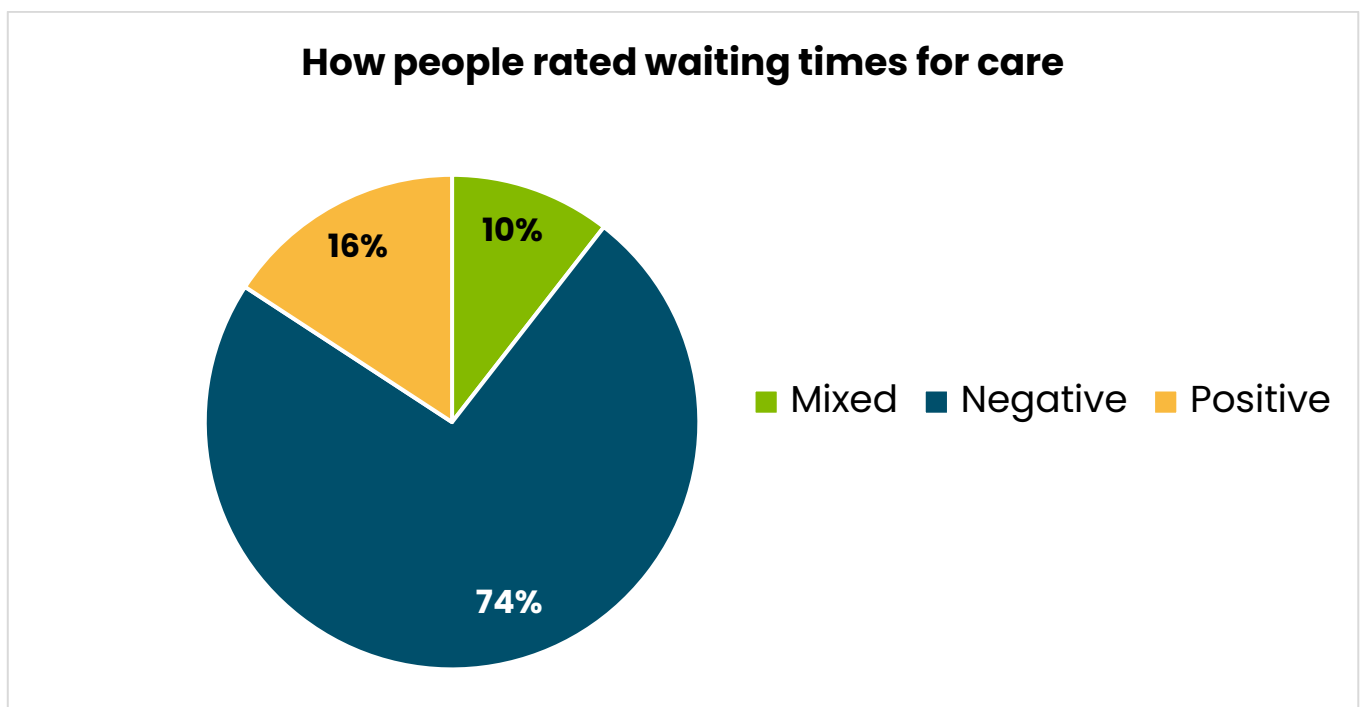


For some people, access to care depends on whether they can use online tools, travel to appointments, or get help from others. When they can’t, people can be left without care altogether. Over time, the risk is a bigger gap between those who can access and use care and those who cannot.

# Waiting times

**People are waiting longer than they expect, and often without clear information about what happens next.**

Waiting times for appointments, referrals and treatment were raised by many people, often alongside concerns about uncertainty and a lack of clear information about what would happen next. Feedback covered a wide range of care, including appointments with local doctors, hospital treatment, diagnostic tests, mental health support and dental care.



For some people, the main issue was how long they were waiting for routine or non urgent appointments. One person told us, **“Appointments are not easy to get, and usually months away,”** while another said, **“It is not possible to get an appointment that is non-urgent in less than 4 weeks.”** These experiences suggest that even when care is not described as urgent, the wait can still be long enough to affect people’s wellbeing.

Others described delays even when something felt urgent. One person explained, **“I asked for an urgent appointment and was denied. I was made to wait six weeks,”** while another spoke about **“a dreadful wait for an urgent appointment – 5 weeks,”** which shows how difficult it can be to access timely care when it is needed.

Delays between referral and treatment were also common, and in some cases these waits stretched over many months. One parent told us, **“An appointment was arranged last November for June this year,”** and explained that in the meantime their child continued to see the doctor with regular infections. Another person said, **“I’ve been told it’s 40 weeks I must wait. I’m in unbearable pain daily,”** highlighting the impact of long waits on day to day life.

Some people also described repeated cancellations and changes to appointments, which added to frustration and uncertainty. One person explained, **“I have had 15 ear, nose and throat appointments made & cancellation and rescheduled and only had 4 actually take place in 11 months,”** showing how disruption can affect both care and confidence.



Waiting for tests and results was another source of anxiety. One person described, **“I had to wait 4 months, which was a very anxious time,”** particularly when they had been told the test was urgent. Long waits were also reported for mental health support, where one person told us, **“The waiting list for assessment was 30 months.”**



Although many people shared difficult experiences, there were also examples where care was provided more quickly. One person told us, **“I received an appointment for audiology within a few weeks,”** showing that shorter waiting times are possible, even if they are not consistently experienced.

Overall, what people told us points to a wider issue. Waiting times are not only long in many cases, but also unpredictable, which makes it harder for people to plan, manage their health, or feel reassured about what is happening.

**For many people, this is not just about waiting for an appointment, but about living with pain, worry or worsening conditions while they wait, often without clear information about when they will be seen or what will happen next.**

**This comes through clearly in the feedback we heard:**

 **“We have been advised by Beech House Surgery in Harrogate that she should be referred to the hospital; however, we have been told this could take months. I am extremely worried about her condition and how she will cope during this waiting period. She has been moved from one medication to another, but no pain relief has been effective. I am deeply concerned that something more serious may be happening, given her current state of health and wellbeing.”** 

 **“I had to wait but eventually accessed a mindfulness course with the Tees Esk Wear Valleys NHS Foundation Trust. They provide mental health support and care. The course is very helpful for my anxiety.”** 



**“Due to a lack of progress with physiotherapy at Harrogate Hospital, my referral was ongoing for over a year with little to no improvement. I eventually paid for private physiotherapy. This delay clearly was detrimental for me and for anyone trying to**



**access appointments.”**

### What this means



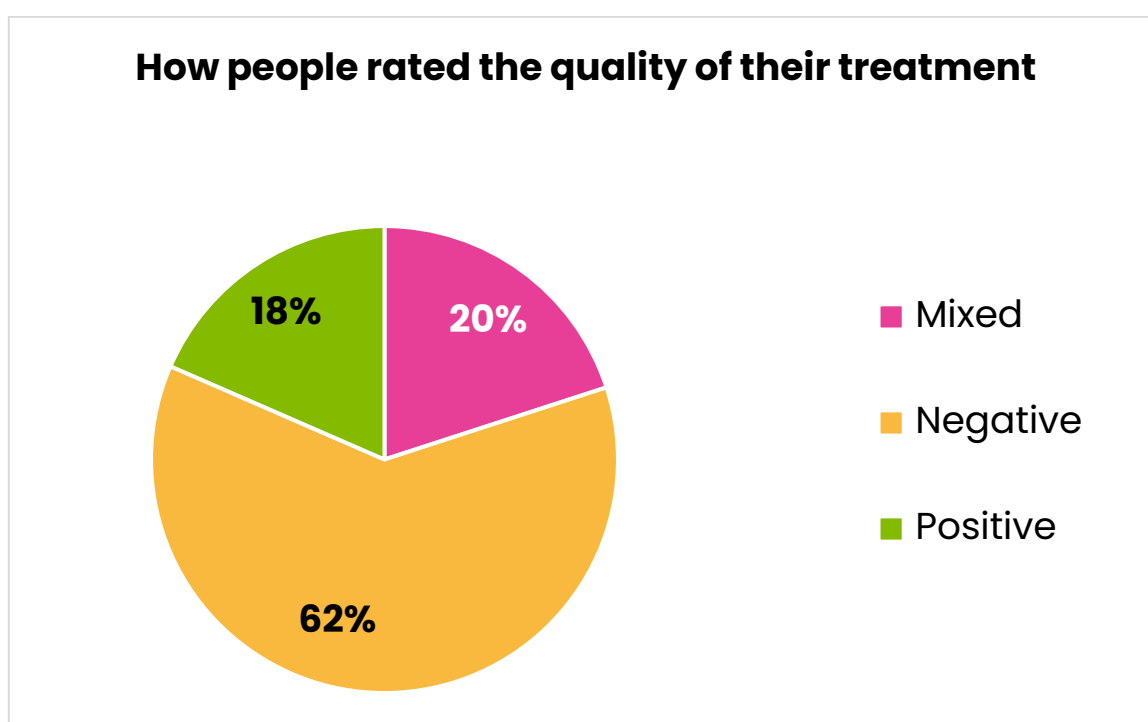
When waiting times are long or unclear, people’s health can worsen while they wait, particularly if they are in pain or dealing with ongoing symptoms. It can also lead to people seeking private care where they can, or going without support altogether, which can increase inequality and leave some people without the help they need.



# Quality of treatment

Care can be very good, but it is not always consistent or followed through.

People's experiences of treatment varied widely, with some describing care that felt effective, well organised and supportive, while others raised concerns about how their care was delivered, followed up or understood.



Many people spoke positively about the care they received, particularly in hospital settings, where staff were described as professional and attentive. One person reflected that **“everyone was professional, kind and attentive – the aftercare was superb,”** while another described staff as **“incredibly nice, kind, respectful, caring and fair,”** showing how good care can leave people feeling reassured and confident in what is happening.

However, not all experiences reflected this. Some people described care that felt inconsistent or did not take account of their individual situation, particularly when they were seeing different staff or having to repeat information. One person explained that care felt **“too depersonalised as I had to tell the same story countless times, to strangers,”** which made it harder to feel understood or supported.

Others spoke about not being taken seriously, sometimes over a long period of time, which affected both their confidence and their health. One person said they had **“finally got a doctor to listen to me,”** suggesting that their concerns had not been properly recognised earlier, while others described situations where symptoms were not fully investigated or followed up.

There were also examples where mistakes or gaps in care had a direct impact. One person described their experience as **“one catalogue of errors after another and I am still in chronic pain,”** while another reported receiving **“someone else’s consultation put on my records,”** which raises concerns about accuracy and continuity.

In some cases, people described more serious consequences, including situations where symptoms were overlooked or treatment was not appropriate. One person told us they **were “ignored in favour of diagnosing behavioural issues,”** despite having physical symptoms, while another said they had been **“given medication they were allergic to,”** showing how important it is for care to be both accurate and safe.

These experiences highlight that the quality of treatment is not only about clinical decisions, but also about how well care is joined up, how carefully information is recorded, and whether people feel their concerns are properly understood and acted on.

**When treatment is effective and tailored to the individual, people feel supported and confident in their care. When it is not, the impact can be long lasting, affecting both health outcomes and trust in the care they receive.**

**People described this in different ways:**



**“I have felt dismissed, misunderstood and even told off at times by Woodlands Surgery, Harrogate. I have had ultrasounds and MRI scans for known problems but did not receive any follow up. When I called to say my son was having a bad reaction to his medicine, it was recorded as me asking for a different flavour. We later found out that my son is allergic to penicillin.”**



**“The care at Bridlington Hospital was exemplary from all involved from ward team, theatre and recovery staff. I was treated with compassion care and respect by all involved.**



### **What this means**

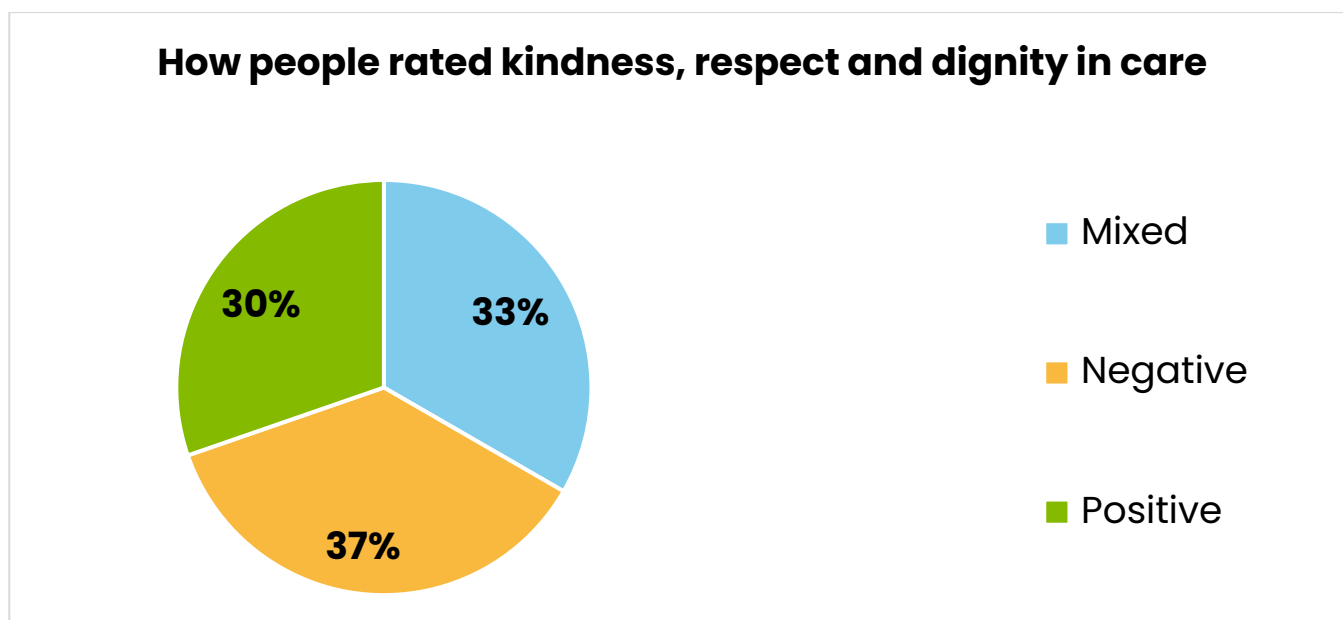


When treatment is inconsistent, incomplete or involves mistakes, it can affect both people’s health and their confidence in care. People need to feel that their concerns are taken seriously, that their care is followed up properly, and that decisions about treatment are safe and based on a clear understanding of their needs.

# Caring, kindness, respect and dignity

**How people are treated continues to vary, and it shapes how safe and supported they feel.**

People's experiences of how they were treated varied. Many described compassionate and supportive care, while others raised concerns about how they were spoken to, listened to or respected during their care.



Some people spoke very positively about the attitude and approach of staff, particularly during difficult or stressful situations. They described feeling reassured, supported and treated with care at times when they were most vulnerable. One person said **“The staff were really supportive and helped me feel comfortable and talked to me,”** while another explained that staff were **“extremely reassuring and I felt safe and cared for,”** showing how much these interactions can shape someone's overall experience.

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**What we heard about health and care, January to March 2026**

However, not all experiences reflected this. Some people described feeling rushed or not properly listened to, particularly when staff appeared busy or under pressure. One person said that staff could be **“brusque and cold and there was no warmth in the care,”** while another explained **“I felt rushed and not heard,”** which suggests that people do not always feel their concerns are fully understood.

People also described more serious concerns about how they were treated. One person reported being told **“If you want to kill yourself, there is nothing we can do about it,”** highlighting the impact that words and tone can have, particularly when someone is already distressed or seeking help.

There were also concerns about privacy and dignity during care. One person described how **“the doctor became angry and said there would be a do not resuscitate decision for me to sign in front of other patients who could hear what he was saying, and the curtains were open so they could see the whole event,”** which affected how they felt about both their care and their dignity.

Some experiences had a longer lasting impact. One person shared **“I want to mention the birth of my son. I was induced but it was paused because of the weekend. When it was time, I felt pressured into a situation that was not clearly explained to me. This led to the room turning into a theatre, me being cut, and my son being forcefully removed. I am still traumatised nearly seven years later,”** showing how these experiences can stay with people long after the event itself.

These kinds of experiences often happen when people are already anxious, unwell or in a vulnerable position, which can make them particularly difficult to forget and more likely to affect how they feel about care in the future.

**Interactions are what people remember. Being treated with kindness, respect and dignity is not a small detail, it is a central part of feeling safe, supported and able to seek help again when it is needed.**



**“The staff at the Darlington Crisis Team were really supportive. They helped me feel comfortable and took the time to talk to me.”**



**“At Harrogate Hospital, the doctor said there would be a ‘do not resuscitate’ decision for me to sign. This was said in front of other patients, who could hear what he was saying. The curtains were open so they could see the whole event.”**



**“I was induced at Airedale Hospital. When it was finally time, I felt pressured into a situation that was not clearly explained to me. This led to the room being turned into a theatre, me being cut, and my son being removed. I am still traumatised.”**



### **What this means**

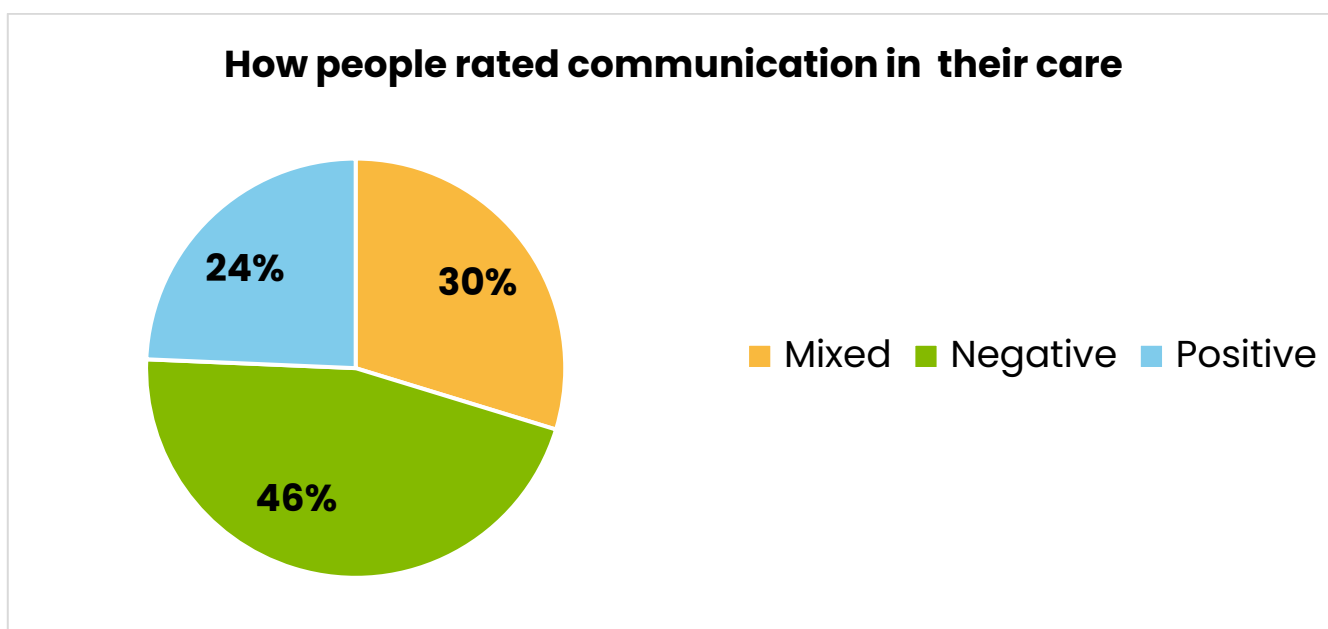


When people are not treated with kindness, respect or dignity, it can leave them feeling anxious, dismissed or reluctant to seek help in the future. Ensuring that people are listened to, spoken to with care and treated with respect should be a consistent part of every interaction, regardless of where they go or who they see.

# Communication

## Clear communication makes a big difference, but people do not always feel informed or listened to.

Communication plays a central role in how people experience care, and many people told us that it shaped whether they felt informed, reassured and confident about what was happening, or left unsure and having to work things out for themselves.



When communication worked well, people described feeling listened to, kept informed and involved in decisions about their care. One person said, **“Our doctor always phones for catch ups,”** while another explained that the nurses at their appointment **“explained treatment options clearly and involved me in decisions,”** which helped them feel more confident about what was happening and what would happen next.

However, not all experiences reflected this. A common issue people raised was having to repeat the same information multiple times, particularly

when they were seeing different staff or when information did not appear to be passed on.

One person explained, **“I find it extremely difficult to cope with the fact that I see a different person every time I interact with my doctor’s practice, and I have to explain everything from the start,”** which can be frustrating and exhausting, especially when dealing with ongoing health issues.

There were also examples where information was recorded incorrectly or where follow up did not happen as expected. One person described how they **“had someone else’s medical notes put on my records and had to get them removed,”** while another said, **“After arranging an appointment, the nurse told me she did not know what blood tests to do and sent me home, and no one got back to me afterwards,”** which left them unsure about what was happening and whether their care was being managed properly.

For some people, communication was made more difficult by additional needs or circumstances. One person explained, **“I often felt rushed and not heard, and I was asked irrelevant questions instead of being treated as an individual,”** while another highlighted that **“poor communication, poor advice and not having different ways to get information affects older people who are less able to use online tools,”** showing how important it is to offer different ways for people to access information.

Language barriers were also raised as an issue, particularly in hospital settings, where some people felt that communication was not always clear or adapted to their needs. In these situations, people can struggle to explain what they are experiencing or to fully understand what they are being told.

Many of these issues are connected. When people see different staff, struggle to get through on the phone, or are expected to go online to manage appointments, information can be lost, repeated or misunderstood, which makes it harder for people to feel confident about their care.

**When communication is clear and consistent, people feel informed, reassured and more able to take part in decisions about their care. When it breaks down, it can lead to confusion, delays and mistakes, and leave people unsure about what happens next or where to turn for help.**

This is reflected in what people told us:



**“After a check-up at Harewood Medical Centre, I had a really positive experience. The practitioner was thorough, friendly and explained everything clearly.”**



**“There were mistakes and miscommunication during my care at Harrogate Hospital. My next of kin was not recorded for six days, and procedures were rescheduled multiple times.”**



### What this means



When communication is unclear or inconsistent, it does not just cause frustration. It can affect how safe people feel, how well they understand their care, and whether they are able to follow advice or attend appointments. Over time, this can lead to delays, missed information and a loss of trust, particularly for people who already face barriers such as hearing loss, language differences or limited access to online tools.

# Conclusion

Accessing care, waiting times, communication, kindness and the quality of treatment continue to come up time and again. This is true across GP services, hospital care, mental health support and NHS dentistry.

At the same time, people are often very positive about the care they receive once they are seen. We hear about staff going out of their way to help, showing compassion and doing their best in difficult situations.

It is important to recognise the wider context. Health and social care services are working under real pressure, including staffing shortages, high demand and financial constraints. Many of the issues people experience sit within that reality.

The themes in this report reflect what people have told us. They highlight where care is working well, but also where there are risks to people's experience and outcomes if issues are not addressed.

Thank you to everyone who shared their experiences with us. Your feedback helps highlight what needs to improve, as well as recognising the dedication and hard work of staff delivering care every day.





**Committed  
to quality**

We are committed to the quality of our information. Every three years we perform an in-depth audit so that we can be certain of this.

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