

Lancashire and South Cumbria ICB Quarterly Public Perception Survey

Summary insight report

November 2025



Introduction

In November 2025, NHS Lancashire and South Cumbria ICB launched the fourth quarterly NHS perception survey of Virtual Citizen Panel members. The survey is designed to track responses to the same questions over the course of the year.

These questions cover the perception of the NHS both locally and nationally, whether the NHS is in need of improvement, and whether the NHS listens to and acts on public feedback.

This report provides the results of the fourth survey, and the next survey is scheduled to take place in March 2025.

Prior to launch, the survey was tested with citizen advisors (members of the Citizen's Health Reference Group) and members of a Reader's Group of members of the public.

Who responded to the survey?



Survey response rates

The survey ran from 21 October to 9 November 2025 and was distributed to the ICB's virtual citizen's panel comprising 2,215 members at that time.

Participants received two email reminders: one at the midway point and another on the final day before the survey closed.

A total of 1,355 virtual citizen's panel members responded, resulting in a response rate of 61 per cent. This is a three per cent decrease on the previous survey.

Who responded to the survey



Demographic breakdown

This quarterly perception survey collects demographic data from the Virtual Citizen panel. To simplify the sign-up process, this information is not collected upfront. The survey covers location, gender identity, sexual orientation, ethnicity, and whether participants have long-term health conditions or disabilities.

Where in Lancashire and South Cumbria do you live?

Answer Choices	Responses		
Blackburn with Darwen		3.99%	54
Blackpool		6.49%	88
Central Lancashire (Preston, Chorley, South Ribble or West Lancashire)		26.57%	360
East Lancashire (Burnley, Pendle, Rossendale, Ribble Valley, or Hyndburn)		11.88%	161
North Lancashire (Fylde, Wyre, and Lancaster)		32.55%	441
South Cumbria (Barrow-in-Furness, Ulverston, Windermere, Kendal, Ingleton, and everywhere in between)	-	16.38%	222
Other (please specify): Show		2.14%	29
Answered: 1,355 Skipped: 0		Response Total:	1,355



Use of services

The initial question assessed whether respondents had used an NHS service in the three months preceding the survey.

Which of the following health services, if any, have you personally used in the last three months?

Answer Choices	Responses		
A&E (accident and emergency)		10.26%	139
Community service (e.g. district nurse, physio, health visitor, sexual health)		14.76%	200
General practice (appointment with GP, practice nurse etc)		72.40%	981
Hospital (inpatient - stayed over night at least once)		5.61%	76
Hospital (outpatient appointment)		40.44%	548
Mental health		4.80%	65
NHS 111 (phone or online)		5.24%	71
Pharmacy		50.41%	683
Urgent treatment centre (including walk-in centre or minor injuries unit)		6.94%	94
I haven't used an NHS service in the last three months		5.54%	75
Don't know		0.15%	2
Other (please specify): Show		4.80%	65
Answered: 1,355 Skipped: 0	Re	sponse Total:	1,355

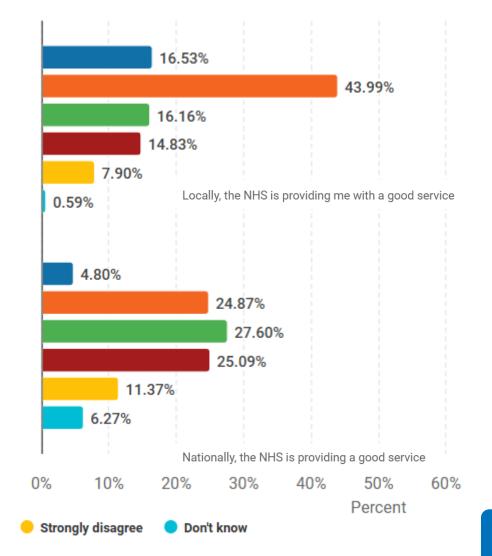
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Perceptions of the NHS

Over the past twelve months there has been a consistent perception about the local and national service provided by the NHS.

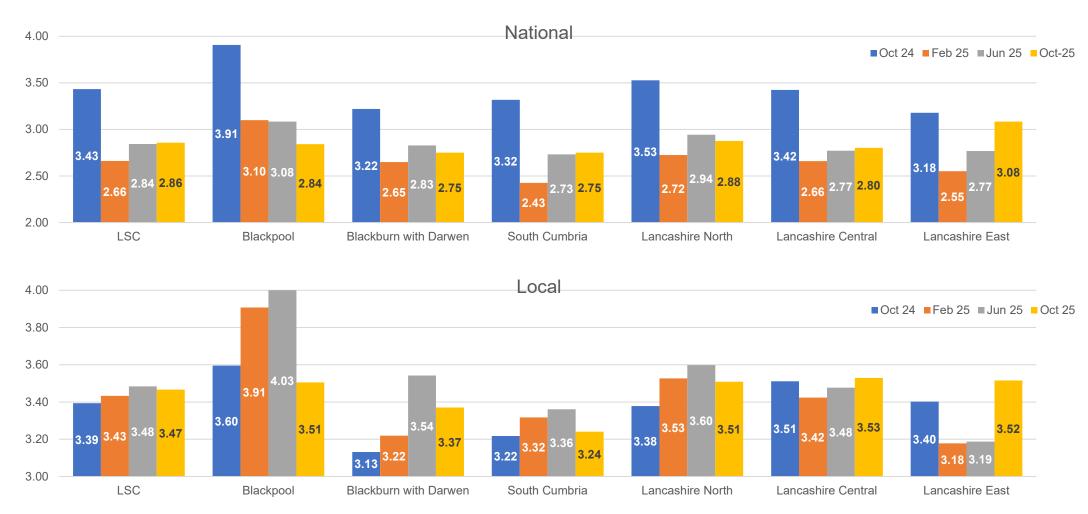
More than 60 per cent of respondents believe the local NHS is providing a good service. This lowers to 30 per cent when asked if the NHS nationally is providing a good service.

This figure is slighly increased compared to 9 months ago where 57 percent said the local NHS is providing a good service and 28 per cent for nationally.



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Perceptions of the NHS – national and local - broken down by Place



Responses above show the level of agreement to whether the NHS is providing a good service where a score of 1 equals least agreement and 5 ismost agreement.

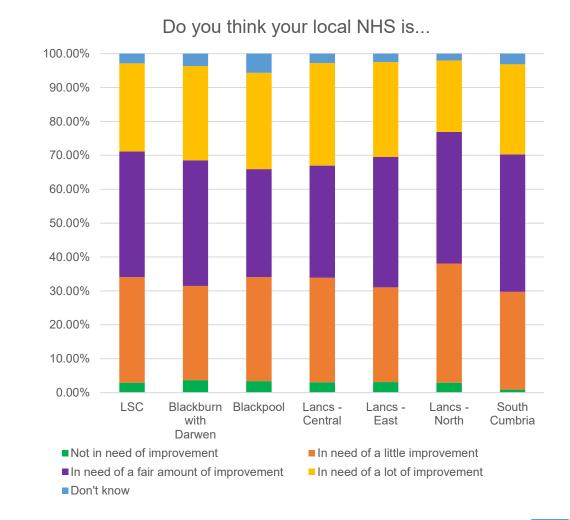
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Perceptions of the NHS broken down by place

Participants were asked about the improvement they feel is needed in the local NHS.

More than 63 per cent of people across Lancashire and South Cumbria felt the NHS requires a fair amount or a lot of improvement. This has been a consistent perception over the past twelve months.

The levels of improvement needed do fluctuate between different areas across Lancashire and South Cumbria - Blackpool and Central Lancashire being above average for needing a lot of improvement





Key themes related to where the NHS needs to improve remain consistent with previous responses:

- Access to GP: Long waits, digital barriers, reliance on A&E.
- Waiting Times: Delays for hospital care, cancellations, slow follow-up.
- **Staffing**: Shortages, high workload, morale concerns.
- Communication: Poor coordination, fragmented IT systems.
- Facilities: Outdated buildings, limited local services.
- Quality of Care: Mixed experiences, gaps in mental health support.
- Processes: Bureaucracy, impersonal

- automated systems.
- Service Gaps: Dental care and community support lacking.
- Overall Sentiment: NHS seen as underfunded but staff praised.



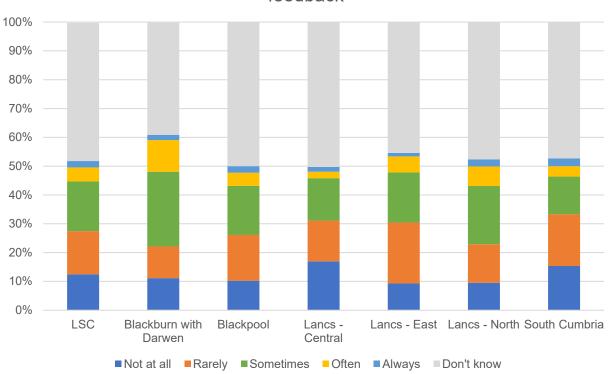
Listening and acting on feedback in NHS broken down by place

Participants are asked if they feel the NHS listens and acts on feedback. This aims to understand if the most engaged members of the public connected to the ICB can see progress in public voice being acted on.

More than 48 per cent of respondents indicated that they didn't know if the local NHS listens and acts on feedback. This is a slight decrease from the last report.

Central Lancashire is an area where people felt the NHS does not listen at all. Blackburn was perceived to be the area where the NHS listen's and acts on feedback most.





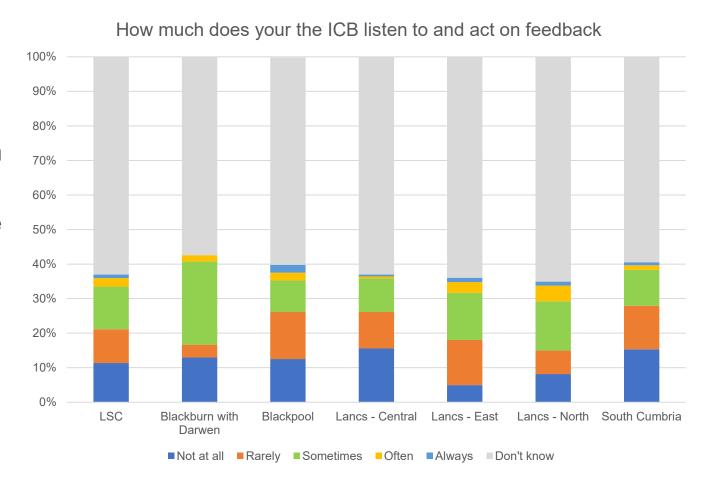


Listening and acting on feedback by the ICB specifically broken down by place

For the first time in this survey, participants were asked specifically whether the ICB listens to and acts on feedback.

Overall, 11 per cent of people said the ICB does not listen at all. 15 per cent said the ICB sometimes, often or always listens to and acts on feedback.

More than 60 per cent of respondents indicated that they didn't know if the ICB listens and acts on feedback.





Key themes related to perception of ICB listening and acting on feedback:

- Most respondents say they do not see any changes or improvements after giving feedback.
- Many mention never receiving feedback or updates about what happens to their comments.
- There is a strong sense that surveys are collected but not acted upon, with phrases like "nothing changes" and "no feedback" repeated throughout.
- Requests for more direct, personal engagement rather than just online surveys.
- Frustration of perceived loss or downgrading of local services, such as ICU, A&E, and walk-in centres.

- Small number of respondents mention positive outcomes, such as prompt responses to complaints or improvements after raising issues.
- Some feel listened to in specific forums or meetings, but these are exceptions.



Conclusion

- Overall participation continues to increase alongside the growing virtual citizen panel membership, although there was a slight decline in the response rate this time but a greater number of responses.
- The citizen's panel is one of a number of methods of engagement in place by the ICB. This method is less likely to appeal to more diverse communities which is expected.
- Perceptions of the NHS and how well individuals feel heard remains static over the past 12 months and is in need of improvement. In areas where neighbourhood working is more developed, such as Blackburn with Darwen, there is some indication that listening to feedback is slightly increased.
- More action will be taken to encourage members of the citizen's panel to get involved in local events to contribute directly rather through online surveys.
- The question regarding whether the NHS listens to and acts on feedback often relates to experiences and complaints relating to individual services which take time to go through a process.
- This is the first report to specifically ask if people believe the ICB listens to and responds to feedback. A larger number of respondents indicated they are unsure if the ICB does listen, and this will be monitored over time.



Next steps

- The ICB aims to demonstrate the impact of influence of local voices in:
 - Commissioning decisions
 - Transformation initiatives
 - Additional aspects of ICB and system partnership programmes of work
- Actively showcase the participation of local communities and encourage citizen's panel members to get involved locally
- Better communicate with the public to highlight the effect of involvement and engagement on implementing population health interventions which are most likely to have an impact at a local level.



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