



Survey Results:

New NHS Online Trust (virtual hospital)

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Introduction

New NHS Online Trust (virtual hospital)

The Department of Health and Social Care and NHS England want to establish a new NHS service which will deliver online elective care services (i.e. virtually/ digitally) as an alternative to seeing someone in person. This service will be optional for patients.

Healthwatch West Sussex have been asked to provide local people's voices, which are crucial to the shaping and setting up of this new **NHS Online Trust**.

The launch of this virtual "**online hospital**" in 2027 will be a significant reform to the way healthcare is delivered in England. The aim is to connect patients directly to specialists via the **NHS App**.

This digital model is designed to reduce waiting lists and improve access, and will focus on nine conditions initially, including glaucoma, menopause, and cardiovascular issues, without a physical site, instead it digitally connects patients to expert clinicians anywhere in England. The first patients will be able to use the service from 2027.

During February 2026, our survey was widely circulated and promoted.

165 people from across West Sussex completed the survey and shared their views.

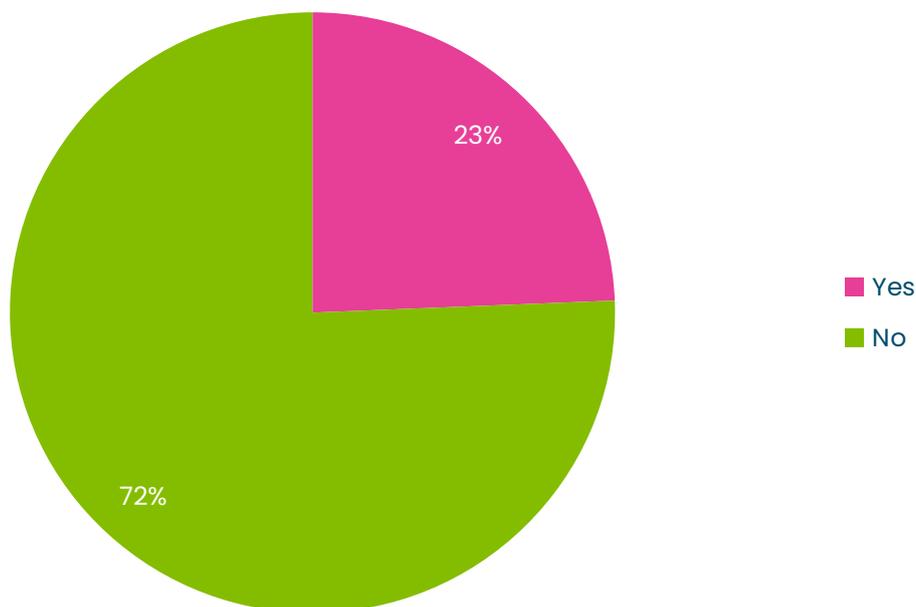
This report is based on this insight and will be shared with our consultation response.

Thank you

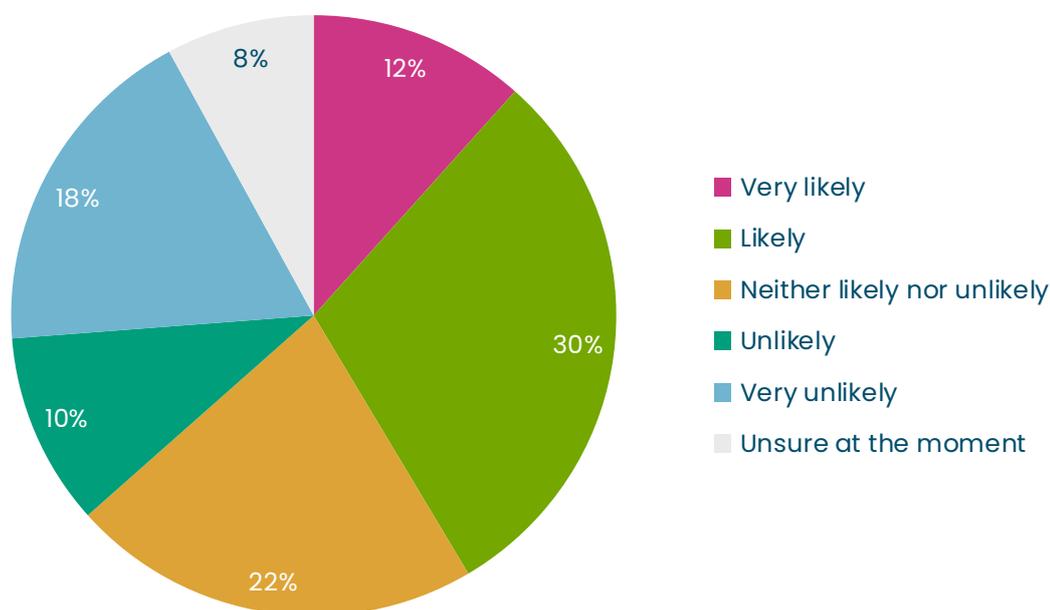
We would like to 'thank' all who have completed the survey and shared their thoughts and insight, to support this important NHS development.

Survey responses

Heard about the creation of the NHS Online Trust



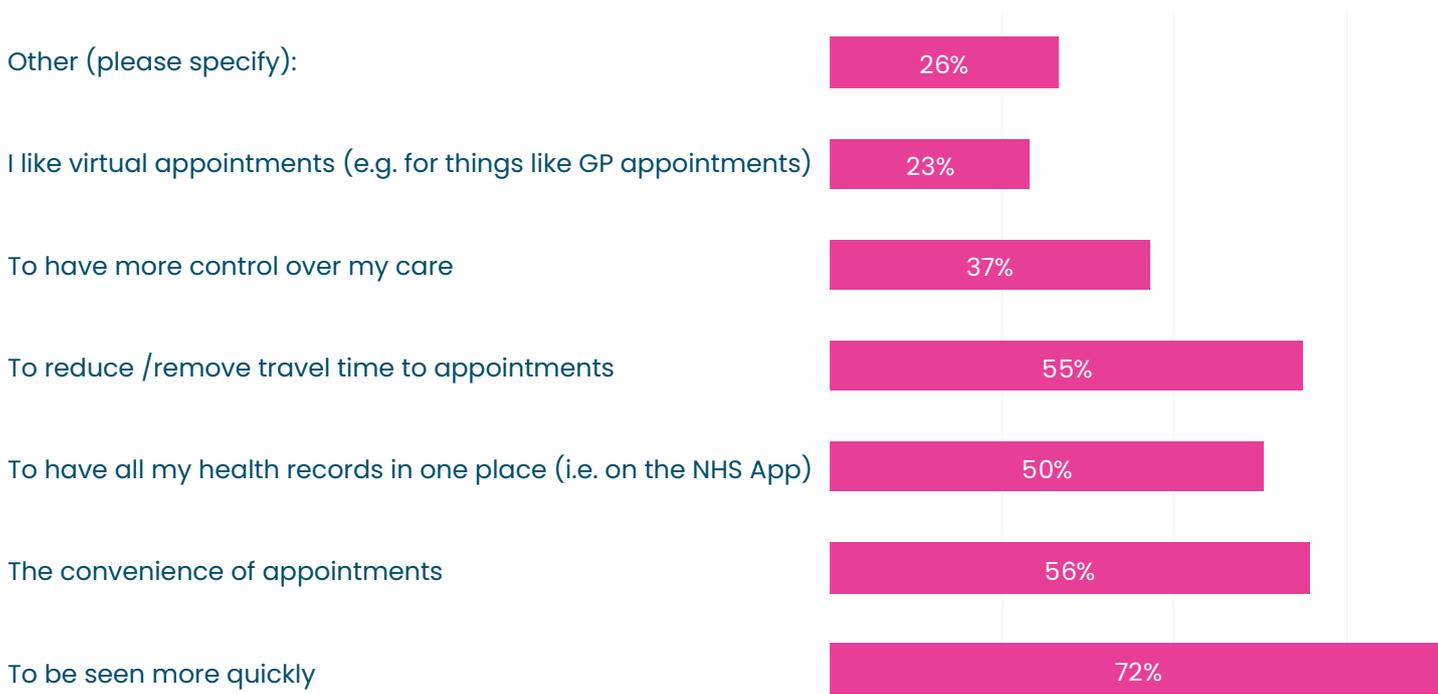
Would you ask to be referred to the NHS Online Trust?



Respondents shared why they might want to be referred to the NHS Online Trust:

The main reasons were to be seen more quickly, convenience, health records in one place and removed travel times, especially for those caring for others.

Why would you want to be referred to the NHS Online Trust?



Concerns responders have about moving to the NHS Online Trust include prefer face-to-face appointments, accessibility and caring role, benefits to the NHS.



Would like face-to-face appointments.

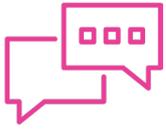
All the above but with the option of face-to-face such as need to listen to chest sounds, or examination of abdominal pain. (This) should not be allowed to become a cop out of physical examination by health professionals.

I would not except to have a first consultation with anything but a medically qualified human. If the examiner doesn't ask the right Qs, there will be delay in obtaining the correct diagnosis. Input equals' output!

I would worry that online is different from being seen in person, there may be issues unrelated that can be missed, online feels dismissive.

I have not had good experiences of online treatment and would not wish it to become the norm for myself.

I don't like virtual appointments. If I am ill, I want to see a doctor in the real world and in person. Although I can use this email to complete the survey, I'm not able to do much else on the computer.

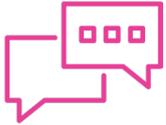


Accessibility and caring role

I'm a wheelchair user and this will reduce the hassle of getting in and out of my car, finding parking etc. It may reduce the likelihood of getting infections whilst in contact with others at hospitals and clinics.

I can sit and think about the answers, rather than having to give an immediate response.

As someone with children this (would) alleviate the pressure of arranging childcare which has limited my access to appointments before.



Better for the NHS

It saves everyone time and money and allows better use of labour resources, which should mean a better service for patients and a more reasonable workload for NHS staff.

It's insane that in 2025 we have such an archaic, inefficient, wasteful NHS process especially at GP level. Patient service and surgery efficiency can be massively improved by telehealth.

To help the running of the rest of the NHS by freeing up resources. We love the NHS, it is ours, we want it to function well.

Why you would not like to be referred to the NHS Online Trust?

Other (please specify):

31%

I do not understand how the new trust will work

23%

I have concerns about how my data will be stored and shared

34%

I have concerns over the use of Artificial Intelligence

59%

I can't afford the technology to access health & care services online

8%

I do not feel confident using the relevant technology

23%

I do not trust the security of virtual/online appointments

23%

I do not think you can get the same level of care virtually/online

52%

Comments shared by responders who would not like to be referred to NHS Online include preference for face-to-face appointments, concern over privacy and personal data, accuracy of medical notes, accessibility, and general concerns.



Face-to-face appointments not virtual

It is all about the speed of getting a diagnosis and treatment initiated (medication, surgery, further consultation, or referral).

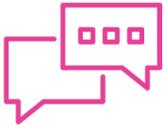
For ongoing treatment, I do feel a face-to-face in person with the treating GP is essential. Also, when caring for parents/others, one app can get confusing over which appointment belongs to whom!

For ophthalmology, concerned about getting advice without having my eye examined and pressure checked (Glaucoma).



Privacy and personal data

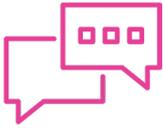
I am deeply suspicious of anything to do with our current government (which includes the NHS) and technology. I do not trust them with my data. Which company(s) are being contracted to develop this technology? Or will it be an NHS in-house project?



Accuracy of notes

I have proved AI to be inaccurate and downright wrong. So, would not trust it on health issues.

AI minutes are unreliable in Zoom meetings. In a clinical context, getting a single word wrong can be crucial (e.g. missing 'not'), and given the multiplicity of ethnicities and languages in use in the NHS I would be concerned about it understanding accents and specialised terminology.



Accessibility

Work with many people who are digitally excluded, and it concerns me what impact this would have on them.

Would it be accessible via a laptop or only via Smart phones as shown in video?

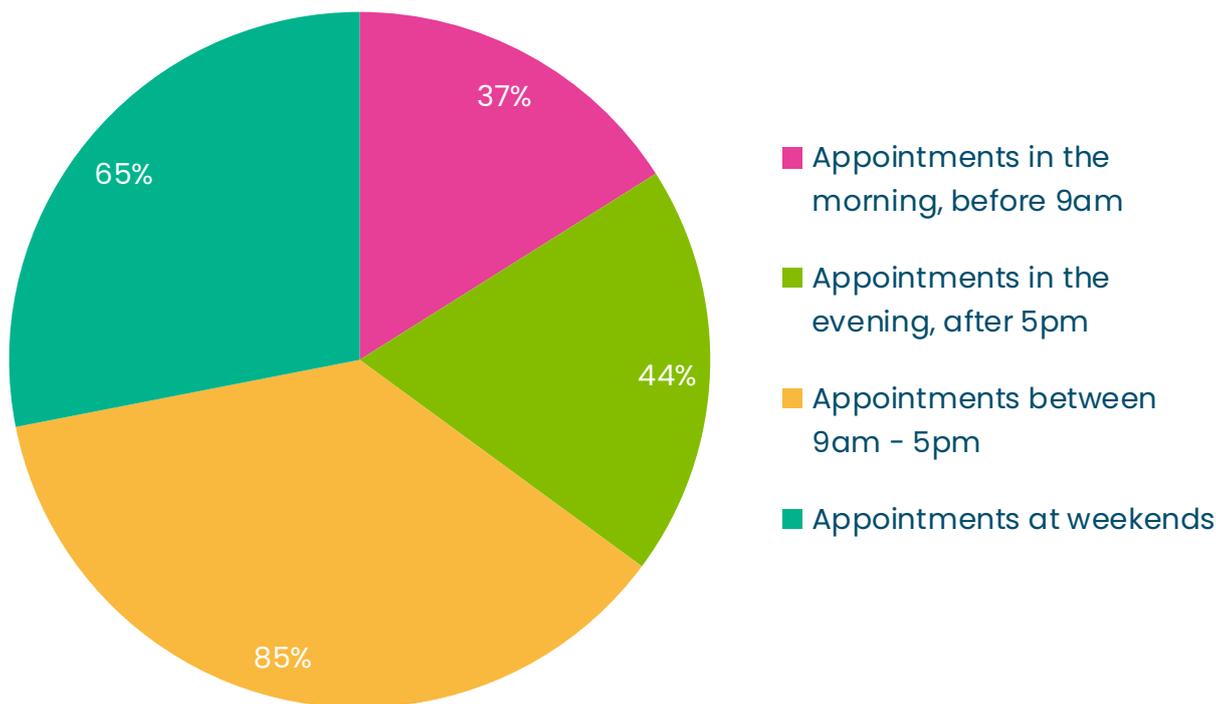


General concerns

The NHS is already struggling to keep pace with new initiatives. This seems just one more with few benefits. I already have consultations with specialists by phone. I suggest the NHS should concentrate on making existing systems work and on training staff to work those systems.

My experience with the NHS is positive about clinical care but very negative about (1) the appalling communication within hospitals and GP practices, and between clinicians and administrators and (2) incomplete and inaccurate personal health records. I don't see any reference in the material describing how the Online Trust will work to sorting out these issues, and they are fundamental to success.

If using NHS Online Trust, when would you like appointments to be available?



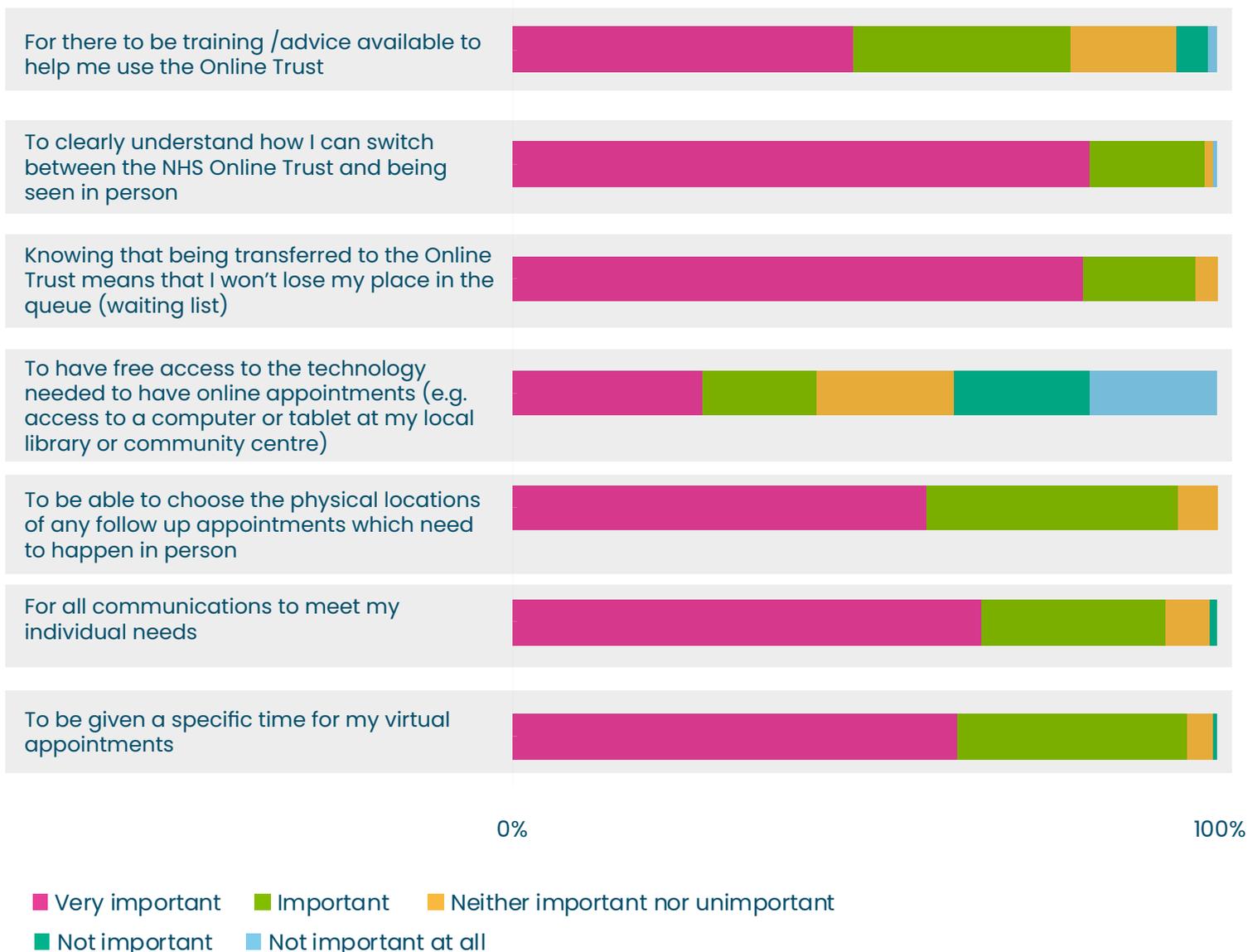
Responders shared their preferred NHS Online important features from the listing provided

(131) how they switch between the NHS Online Trust and being seen in person.

(128) being transferred to the Online Trust means so that they do not lose their place in the queue (waiting list).

(105) communication to meet individual needs.

Using the NHS Online Trust features



Comments responders shared about features fell into the categories of accessibility, cost of development to NHS, how will the new IT system work, information, joining up support, privacy, security of data, staff knowledge versus AI, just a terrible idea.

Accessibility	Cost of development to NHS
<ul style="list-style-type: none"> • Technology needs to be somewhere (a library) wheelchair accessible with free blue badge parking and assistance to use. • Translation service • Ability to use voice in addition to keyboard entry. 	<ul style="list-style-type: none"> • Sounds a good idea but am sceptical about the ability of the NHS to implement in a timely cost-effective way given previous history of IT introduction.

Staff knowledge versus AI

- To know the name and work title of any person triaging me.
- To know staff working online are appropriately qualified.
- How would the training of GPs supporting be done.
- Will training be on going, still able to use successfully with a booklet for reference.
- The primary issue is staffing of the service as well as prior understanding of the patients' condition.

How will the new IT system work

- What is meant by 'transferred' and 'switch'?
- You still see your local hospital/s for tests and procedures; it's just the admin of booking an appointment and the delivery of it over a screen that would change.
- I don't like the idea that half the information is in the 'Virtual hospital,' and half (or none) is in the physical hospital.
- Continuity of care is important.



My family member's mental health care has been massively harmed by missing, incomplete or downright erroneous notes taken by a variety of people and the inability of the next person to read it all and piece it together, meaning massive data loss, repeated wrong medication decisions and severe iatrogenic harm. Need major safeguards against increasing this so it becomes the norm.

I once withdrew from the NHS provided CBT service as the agents changed every time AND were clueless about previous calls/status.

Information

- Need to explain how it fits in, and why there is a need for it in the first place.

Joined up support

- An important feature would be a clear status and what will happen next and when for each medical issue.
- Very important to have regular, easy human help when having difficulty to manage the system.

Privacy

- I'm not great with technology and if I ask my sons for help, I will lose privacy.
- If appointment is to be in public space for digital access e.g., library, how will the patient ensure privacy.
- I don't see how providing a computer in a library etc., could help: unless it was in a soundproof booth and could be booked for the time of the virtual appointment.

Security of data

- A concrete assurance and proven means to prevent my personal data being accessed or managed by any 3rd party organisation.
- Clear signalling when AI or machine learning has contributed to the service or communication being offered.
- I would like to have the fallback of a face-to-face interview.

Terrible idea

- I am Totally Opposed to all attempts to force me to use a Virtual Service!
- I don't trust the idea let alone anything else.
- Only face to face appointments with a real doctor (NOT AI!) are of any use to anyone. Would never use it.
- These answers are academic as I would not use the online service.

Final comments

The comments from responders about NHS Online Trust fell into the following categories: good idea, accessibility, terrible idea, privacy and data security, questions, and ideas.

Good idea

- Any improvement in access to NHS professionals must be good news.
- A good idea, especially if it allows access to the “best” treatment irrespective of patients’ home location.
- All power to your elbow – it could radically improve the service.
- Bring it on, sooner the better.
- Anything that improves patient care and reduces hospital waiting lists is an idea worth trying. This is the future however visual online appointment should be encouraged so that both the patient and specialist can see each other online.
- I think it can be a great way for people to be seen and advised on their treatment without lots of travel and potential missed appointments.
- Seems like an excellent plan to cut waiting times and blocking GP access with issues that could be sorted online. The idea that we can select where we choose to go for treatment etc, is a great plus. All this will ONLY work if the technology is easy to follow and there are not loads of hoops to jump through.
- The idea is credible but if that system goes down as I know NHS systems do, or it is not compatible with other systems there is hopefully a support plan.
- The most important is the ability to transfer from online to physical care seamlessly.

Accessibility

- Although I am elderly, many of my elderly friends would be concerned about accessing their medical requirements/appointments online. I am pleased to see they will still be able to use the NHS as it is today, hopefully, enabling their appointments to be sooner.
- I already struggle to manage 2 online medical sites as it is complicated to find the information on them. Will the new one be made very simple to use?
- Currently find the NHS App cumbersome to deal with logging in/out and difficult to work with. Confusing if looking after others as reminders do not always state who the reminder appointment is for!
- I can see this could cut down waiting lists; the main thing is confidence in the NHS person you are talking to.
- I’m mid 60’s and beginning to lose confidence in technology as AI kicks in on everything and it concerns me that I’ll be left behind and no longer able to use technology to see a GP. Just frustrating.

- My husband (78) is not computer literate and unlikely to become so. It already takes him 50 mins to complete the GP surgery's e-form (only available to complete 1 hour a day) so he is unlikely to benefit without a lot of support. Older people like him are beginning to feel like 'poor relations'!
- Neither my wife nor I have the NHS app.

Terrible idea

- Unacceptable on so many levels and for so many individuals.
- As a qualified nurse of many years personal contact is so important, to go to an online service I fear things will be missed.
- Like all innovations, this sounds too good to be true. In addition to this cynicism, I cannot really see myself being capable of using as I don't even have a smartphone or use texting on my steam powered clam phone.
- It is a ridiculous idea, expecting us to be diagnosed via a computer screen. This automatically discriminates anyone without the technology - they're not going to want to sit in a public place to discuss their medical problem.
- Money spent on an AI system that will fail is wasted money, think back to the 80's when computer systems were brought in and failed to work. The only people to benefit from an AI hospital would be the people developing the system.
- Ten years ago, I might have been keener but now feel reluctant because of similar experiences with e.g., banks!
- Would prefer to see a medical nurse or doctor.
- There is a real need to retain the trust built between patient and clinician in a face-to-face consultation. I don't see how this can be done in a virtual situation. Some conditions/illnesses must be seen/examined in person to get a proper diagnosis. I fail to see how this can be replaced by a virtual examination. Not all patients will possess the contortionist skills and abilities, nor the 'other person' to photograph/screen the body parts/ injury causing concerns. This could impede a virtual diagnosis and end up making a patient feel worse and unintelligent or inadequate.

Privacy and data security

- Now patient data from hospitals, clinics, GP surgeries, Opticians and Dentists is poorly integrated.
- My biggest concerns are who can access the data and the risk of hacking.

Questions and ideas

- I have NIL confidence in large NHS IT projects. Every large IT system development in the NHS has been reported to have underachieved, cost more than budgeted, and been delayed. Personal interaction deals with and supports much more than clinical diagnosis, in ways that benefit patient and clinician well-being and mental health.
- Vastly improved communication across and within all NHS units. How will clinicians have time for online consultations? Per capita healthcare needs are greater for the older population. This is also the part of the population with least online skills, experience, or interest. How will this mismatch be fixed? The administrative burden borne by NHS hospitals and other units which manage appointments is currently a huge issue of inefficiency. How will the necessary transformation in this vital area be achieved to make the NHS Online Trust viable?
- I suggest that this is trialled first with people who are particularly interested and supportive of this approach. Before a full roll out, such a group would be able to help identify what works well and what would be even better if further tweaks or changes were made.
- Don't call it a virtual hospital. It's not a hospital and confusing for people that would link an online appointment to the care delivered in a hospital setting.
- Could be used for the more 'admin' type appointments. My experience of online appointments during covid was not good, resulted in misdiagnosis, no follow up and being left with a condition that was worse than when I started.
- I think the comments from the patient organisations regarding patients being digitally able to use the technology is critical to making the system work effectively and at maximum efficiency.
- IT manager, I know the importance of thorough testing and trials are to the success of new systems so hope this has been factored into the plan.
- There's a possibility it won't reduce NHS demands. I am more likely to use the service for things I have given up seeking medical help for - minor conditions, long-term conditions (eg my IBS hasn't been reviewed for 30+ years; my sleep medication was prescribed via the hospital 20 years ago and still not reviewed; my fibromyalgia similarly) - GPs don't have time for non-acute conditions.
- Will jobs for current trusts be transferred to the online trust.
- Would I need a smart phone for the online App - I don't have one.
- Would need to ensure that the appointment is with an actual Doctor and not ChatBot or AI!

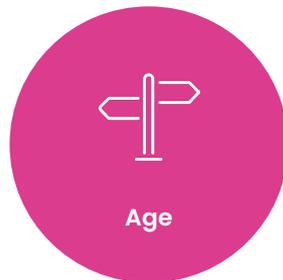
Next steps

This report will form part of our submission to the NHS Online Trust consultation.

Respondents' characteristics



Female (108)
Male (50)
Prefer not to answer (7)



Age between 29 and 89 years.
Average age 59 years



Asexual (6)
Bisexual (1)
Gay or Lesbian (1)
Heterosexual (136)
Pansexual (2)
Prefer not to say (19)



Disability (31)
Long-term condition (101)
Carer (31)



White British (154)
Asian British (1)
Mixed (White and Black Caribbean, Black African or Asian (1)
Blank (9)



Talk to us

If you have questions about the content of this report, please either call 0300 012 0122 or email cheryl.berry@healthwatchwestsussex.co.uk

How this insight will be used?

We recognise that all health and care services are under pressure at this time and have had to adapt their ways of working. We will share this report with the local NHS, Local Government, and other providers to help them understand where things are working well and services are adapting to meet peoples' needs, and to help them identify any gaps. We see this as a continuation of discussions taking place and will continue to use this fresh insight and the solutions presented to challenge for a better future.

For help, advice, and information or to share your experience

We also help people find the information they need about health, care and community and voluntary health and care support services in West Sussex.

Here to help you on the next step of your health and social care journey



You can review how we performed and how we report on what we have done by visiting our website www.healthwatchwestsussex.co.uk



Healthwatch West Sussex works with **Help & Care** to provide its statutory activities.

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