



**Annual Report 2024–2025**

# **Unlocking the power of people-driven care**

Healthwatch  
Gloucestershire

# Contents

A message from our CEO	3
Messages from our Commissioner and ICB	4
About us	5
Our year in numbers	6
A year of making a difference	7
Working together for change	8
Making a difference in the community	9
Listening to your experiences	10
Hearing from all communities	13
Information and signposting	15
Showcasing volunteer impact	17
Thank you from our manager	19
Finance and future priorities	20
Statutory statements	22



69

"The impact that local Healthwatch have is vitally important. Healthwatch are empowering their communities to share their experiences. They're changing the health and care landscape and making sure that people's views are central to making care better and tackling health inequalities."

**Louise Ansari, Chief Executive, Healthwatch England**

## A message from our CEO

**It is with great pride that I introduce Healthwatch Gloucestershire's Annual Report for 2024–2025—our first full year of delivery under The Care Forum.**

This milestone marks a year of transformation, deep listening, and meaningful impact. From day one, our team and volunteers have embraced the opportunity to build trusted relationships, amplify community voices, and ensure that lived experiences shape health and care across the county.

This year, our volunteers contributed an incredible **575.5 hours**—a powerful demonstration of community-led action and its value in improving care.

We are also excited to be implementing new systems for managing data and insights. These will help us better capture, analyse, and share feedback—ensuring that every voice is heard and used to inform meaningful change.



"I want to extend heartfelt thanks to our dedicated staff and volunteers, whose passion and commitment have been the driving force behind our achievements."

**Kevin Peltonen-Messenger, CEO, Gloucestershire**

## Messages from our Commissioner and our ICB

“Through partnership working, effective and adaptable engagement, and the use of new locality-based reference groups, Healthwatch Gloucestershire has demonstrated strong contract delivery. Their targeted work with children, young people, and ethnically diverse and underrepresented communities has ensured inclusive representation and meaningful insight and which is specifically commendable this year. This approach, alongside the newly re-established Enter and View process is supporting the adult social care quality assurance framework. Across the One Gloucestershire system they are key enablers for driving service improvement and deepened understanding of local needs supporting commissioning of services and holding the “system” to account.”

**- Cheryl Hampson, Head of Quality & Performance  
Adult Social Care, Gloucestershire County Council**

“NHS Gloucestershire ICB continues to value the constructive working relationship it has developed with Healthwatch Gloucestershire. This year HWG volunteers and staff have regularly participated in meetings and groups such as the Countywide Patient Participation Group Network and the Dental Strategy Group; sharing insights. HWG colleagues have presented powerful patient stories to our Board meetings; which have prompted important discussions, informing for instance service development for people with neurological conditions. The HWG Readers Panel volunteers have reviewed and improved numerous public communications and the HWG reports on subjects as varied as ‘hidden homelessness’ and ‘quality of life for older people’ have been well received and will be used well - in the case of the latter it will guide our implementation of the Frailty Strategy across Gloucestershire.”

**- Dr Becky Parish, Associate Director, Engagement  
and Experience, NHS Gloucestershire**

## About us

# Healthwatch Gloucestershire is your local health and social care champion.

We ensure that NHS 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.



### Our vision

To bring closer the day when everyone gets the care they need.



### Our mission

To make sure that people's experiences help make health and care better.



### Our values are:

**Equity:** We're compassionate and inclusive. We build strong connections and empower the communities we serve.

**Collaboration:** We build internal and external relationships. We communicate clearly and work with partners to amplify our influence.

**Impact:** We're ambitious about creating change for people and communities. We're accountable to those we serve and hold others to account.

**Independence:** Our agenda is driven by the public. We're a purposeful, critical friend to decision-makers.

**Truth:** We work with integrity and honesty, and we speak truth to power.

# Our year in numbers

We've supported more than 5469 people to have their say and get information about their care. We currently employ 4 staff and, our work is supported by 27 volunteers.

## Reaching out:



Nearly 5000 people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

Over 500 people came to us for clear advice and information on topics such as mental health support and finding an NHS dentist.

## Championing your voice:



We published 6 reports about the improvements people would like to see in areas like pharmacy, quality of life for older adults and the impact of hidden homelessness.

Our most popular report was '[Community Pharmacy in Gloucestershire](#)', highlighting people's struggles in accessing pharmacy care.

## Statutory funding:



We're funded by our Local Authority in Gloucestershire. In 2024/25 we received 269,000, which is 25% more than last year.



# A year of making a difference

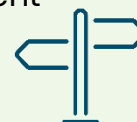
Over the year we've been out and about in the community listening to your stories, engaging with partners and working to improve care in Gloucestershire. Here are a few highlights.

## Spring

We contributed insight to the One plan which sets out the ambitions for children and young people based on experiences and priorities of children, young people, their families and professionals.



As part of an Evidence Based Design programme for the new Clinical Diagnostic Centre, we shared public feedback about how signage, appointment letters and text notifications could be improved.



## Summer

With the ICB, we interviewed for two Dental Clinical Advisors who will listen to those working in dentistry, and the public, to develop a place-based approach to commissioning and delivery.



We have been involved in developing The Making Every Adult approach, supporting local areas to transform services and systems to improve the lives of individuals facing multiple disadvantage.



## Autumn

We have shared public feedback to the Gloucestershire Health and Care Trust to support the delivery of the new Integrated Urgent Care Service.



Gloucestershire Hospitals NHS Foundation Trust held a session with us in December, to listen to views and ideas for the co-production of their new strategy.



## Winter

We shared public views into an engagement piece around the NHS 10 Year Plan led by Becky Parish, Director of Engagement and Experience at NHS Gloucestershire.



We have supported the co-design of a Coproduction Charter for Gloucestershire, creating equal partnerships between people using services and professionals to deliver better outcomes and build stronger communities.



# Working together for change

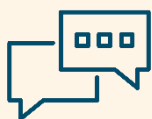
**We've worked with other organisations to ensure people's experiences of care in Gloucestershire are heard at the Integrated Care System (ICS) level, and they influence decisions made about services at Gloucestershire ICS.**

## A collaborative network of people & organisations:



Our new Local Advisory Group was formed with the aim of better representing the diverse needs of our community, ensuring that everyone has a voice in shaping health and care services. This year, members helped us to identify and prioritise the most pressing health and social care issues in Gloucestershire as well as advise on strategies to engage with, and amplify the voices of, under-represented and marginalised groups.

## The big conversation:



We contributed to the development of Rethink's Mental Health VCSE forums in Gloucestershire's five localities. This will utilise a multidisciplinary approach to discuss how best to support someone experiencing enduring mental illness, including VCSE and statutory organisations that provide services, support, or opportunities for people with serious mental illness, and Experts by Experience, to develop pathways, identify training and provision gaps and coproduce solutions to local need.

## Building strong relationships to achieve more:



Alongside Future Me Youth Representatives, we helped facilitate a 'Voice Event' for children and young people with additional needs. Over 20 children and young people took part in creative and fun ways to share ideas about education, health, care and inclusion. The voices heard at this event informed the Future Me update to the SEND and Inclusion Local Area Partnership (SILAP), who are responsible for leading local improvements.

We've also summarised some of our other outcomes achieved this year in the Statutory Statements section at the end of this report.



# Making a difference in the community

**We bring people's experiences to healthcare professionals and decision-makers, using their feedback to shape services and improve care over time.**

Here are some examples of our work in Gloucestershire this year:

## Creating empathy by bringing experiences to life



**Healthwatch England shortlisted our Care Act Assessment work in 2023 for an Impact Award.** By sharing experiences with us, people with care needs and unpaid carers played a vital role in influencing the self-assessment of Adult Social Care. When the CQC assessment took place in September, we supported more people to share stories as Experts by Experience which led to a comprehensive review of the customer experience journey and new leadership roles to lead coproduction and early intervention and prevention.

## Getting services to involve the public



**We presented feedback from Parkinson's patients and their carers at the January ICB Board meeting.** We heard about a lack of information being provided to people when diagnosed, as well as follow-up appointments, concerns about the frequency of appointments, and lack of coordinated and holistic care affecting people's experience and outcomes. This year we are collaborating with the Neurology Clinical Programme Group, the ICB and Parkinson's UK to involve even more patients to make actionable recommendations for improvement.

## Improving care over time



**In 2024, we heard that poor communication causes confusion and frustration about appointment booking processes, triage systems, and roles of different professionals in GP practices.**

This year we have collaborated with the Local Medical Committee and NHS Gloucestershire to create an information booklet for people trying to access GPs. Including contributions from PPG members and our HWG readers panel, we are inviting people to feedback what could be included in future editions, so they are co-produced as much as possible.

# Listening to your experiences

**Services can't improve if they don't know what's wrong. Your experiences shine a light on issues that may otherwise go unnoticed.**

This year, we've listened to feedback from all areas of our community. People's experiences of care help us know what's working and what isn't, so we can give feedback on services and help them improve.

"The feedback local Healthwatch hear in their communities and share with us at Healthwatch England is invaluable, building a picture of what it's like to use health and care services nationwide. Local people's experiences help us understand where we – and decision makers – must focus, and highlight issues that might otherwise go unnoticed. We can then make recommendations that will change care for the better, both locally and across the nation."

– Louise Ansari, Chief Executive, Healthwatch England



# Listening to your experiences

## Championing community concerns to restore access to pharmacy care

As the number of services that pharmacies can offer has increased, so did the amount of feedback we've received about them.

While many people shared positive experiences, others had concerns, such as shortages of medication and delays in receiving their full prescription.

### What did we do?

More than 600 people shared concerns including pharmacy closures or changes to opening hours, difficulties with repeat prescriptions, and the cost-of-living crisis.

We also visited 13 Pharmacies across the county to speak to Pharmacists about their experiences and Pharmacy First.

### Key things we heard:



**75%**

**of people who completed our survey like to access their pharmacy in person.**

**23%**

**of people reported missing medication doses due to medication shortages.**

**38%**

**of people said they were aware of Pharmacy First.**

Our work highlighted the need to fund pharmacies properly to maintain their valued role in communities and ensure it is sustainable and rewarding to the future workforce.

### What difference did this make?

During our engagement, the ICB developed Pharmacy First campaign materials for GP and pharmacy teams to share in waiting areas and via their social media and will work with HWG to target groups reporting low awareness.

# Listening to your experiences

## Amplifying the voices of people experiencing hidden homeless

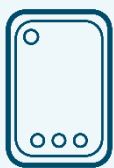
**Hidden homelessness typically refers to individuals who are not recognised by housing services**

We found that even when a person is known to their local authority, they may still be unable to access services to promote positive mental and physical health through short-term or unsuitable accommodation, leaving people without the stability needed to rebuild their lives.

### What did we do?

We gathered stories and created a survey to capture feedback from people with lived experience. We also used a survey to gather the perspectives of organisations supporting people at risk of hidden homelessness.

### Key things we heard:



- **Physical and mental health frequently take a back seat as people focus on immediate needs for survival, leaving longer-term health concerns unaddressed perpetuating a cycle of instability.**
- **Advocacy support is critically lacking, leaving people struggling to navigate complex systems.**
- **Transitions between services are critical moments.**



"Individuals with a dual diagnosis – such as mental health issues combined with substance misuse – are often pushed between services rather than receiving integrated care."

### What difference did this make?

Our report contributed to strategies including the Making Every Adult Matter approach, focussing on improving outcomes when safeguarding rough sleepers with complex emotional needs, and the newly established Rethink Mental Health VCSE forums, with experts by experience, to collaboratively develop pathways, address training gaps, and ensure integrated service delivery at the earliest opportunity.



# Hearing from all communities

**We're here for all residents of Gloucestershire. That's why, over the past year, we've worked hard to reach out to those communities whose voices may go unheard.**

Every member of the community should have the chance to share their story and play a part in shaping services to meet their needs.

**This year, we have reached different communities by:**

- Attending community events and groups to build trust and develop meaningful relationships with people to reduce stigma and raise awareness of what we do.
- Using translation services and interpreters to ensure that people feel heard and able to express themselves as individuals.
- Demonstrating that people's voices have been heard by sharing feedback with local NHS leaders and our Integrated Care System through our reports and making recommendations for improvements.



# Hearing from all communities

## Improving Quality of Life for older adults in Gloucestershire

To understand what different communities want and need as they age, we carried out focus groups with Bangladeshi carers, Pakistani group, Asian carers, Chinese women, Carers hub group, Ukrainian refugees, Gujarati women and a Polish community group.

People told us that culturally appropriate care is essential to building trust, engagement, and ensuring equitable access to services. Many community members have valuable skills and experiences they want to share; however, they are unaware of how to develop these into sustainable projects, activities or businesses.

### What difference did this make?

We shared our findings with Gloucester ILP as part of their Active Ageing strategy and with the VCSE Alliance to inform their work with the Summerfields Trust to develop an investment proposal focussing on supporting people to have a good quality of life. Our recommendations will guide the implementation of the Frailty Strategy across Gloucestershire.

## Advocating for trans and non-binary people to have the care they need

Annie told us about her transition from male to female, to raise awareness of the challenges she faced in getting the healthcare she needed through Shared Care Agreements, and is still working to overcome;

"I felt they were arguing rather than listening."

As an active member of the LGBT+ Partnership, Healthwatch England funded us to gather views on trans and non-binary peoples' experiences of GPs. We heard a lack of awareness training and poor communication leading to misgendering is compounded by people feeling they do not have a voice in communicating with their GP.

### What difference did this make?

The ICB are holding workshops with the trans community to ensure people can get healthcare locally; access to blood testing and prescriptions through a local GP. Anyone who has contacted PALS about has now been able to get their medication.



# Information and signposting

Whether it's finding an NHS dentist, making a complaint, or choosing a good care home for a loved one – you can count on us. This year over 500 people have reached out to us for advice, support or help finding services.

**This year, we've helped people by:**

- Providing up-to-date information people can trust
- Helping people access the services they need
- Supporting people to look after their health
- Signposting people to additional support services



## Involving carers to safeguard individuals from avoidable harm

**Claudia contacted us after she was left feeling out of her husband's care and did not know where to turn.**

Her husband developed pressure ulcers following a period of respite in a care home. He was being treated in hospital, but Claudia was not being included in discussions about what his discharge plan and future care should look like. We raised a safeguarding concern due to the pressure ulcers and shared this story with Gloucestershire Hospitals NHS Foundation Trust who put Claudia in touch with their Patient and Carer Experience Improvement Manager. Claudia was keen to share her experience so that other people don't have to go through the same thing. As a result, Claudia said:



"The staff in the hospital have been fantastic and have ordered an air mattress which will take a few days, but once this has arrived, he will be able to go home.

## Improving access to non-emergency patient transport

**Emily was just about to complete 6 weeks of radiotherapy, using Emed transport to enable her to attend every weekday.**

The drivers were "wonderful", however, on behalf of patients who are battling cancer, she wanted to feedback her experience of long delays.



"Tuesday 4hr wait to get home. Wednesday I was taken in late, so I had to wait 2hrs to be seen, late home again. Yesterday, pick up was an hour and a half late, so radiology had to fit me in when I got there. I had to phone 3 times to chase transport up."

We shared this with the ICB who commission non-emergency hospital transport who acknowledged the impact of delays on patients and ensured that Emed formally responded to this individual. The ICB have also assured us that Emed has taken positive steps by adding a note to the patient's file for the control centre to monitor future bookings.



# Showcasing volunteer impact

**Our fantastic volunteers have given 575.5 hours to support our work. Thanks to their dedication to improving care, we can better understand what is working and what needs improving in our community.**

## **This year, our volunteers:**

- Supported people to share views through engagement events and visits to pharmacies and community centres
- Carried out an Enter and View visit to a local care provider to help them improve
- Supported with PLACE assessments at Gloucestershire Hospitals NHS Foundation Trust, Gloucestershire Health and Care Trust and the Nuffield Health
- Reviewed NHS literature including a Virtual Wards leaflet, a Wound Care booklet, a bereavement leaflet and an Advanced Care Planning document
- Carried out research for our Hidden Homelessness project
- Connected with University of Gloucestershire biomedical science students to provide firsthand insights into experiences with hospital and pathology services



# 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.

"On behalf of our students and faculty, I would like to sincerely thank everyone from Healthwatch Gloucestershire for joining us in the recent interactive session. It was an incredibly valuable experience for our students, particularly in understanding the human impact of healthcare decisions.

We are incredibly grateful to you for sharing your experiences so openly and honestly. It is one thing to learn about healthcare in theory, but hearing real stories of stress and perseverance made a lasting impact."

**- Dr Lynsay Cooper, University of Gloucestershire**

"Volunteering is my way of thanking the NHS for literally saving my life. I love meeting people with stories to tell about their experiences of local health and care services.

I take part in regular PLACE and 15-Steps assessments of NHS premises, visit Care Homes to gather residents feedback and take part in various health and care related groups e.g. the GCC Physical Disability & Sensory Impairment Partnership Board and the ICB Working With People And Communities group.

"I thoroughly enjoy contributing to the development of health and care services in Gloucestershire. It gives me the sense of purpose that I was seeking but more importantly I meet loads of interesting people whose voices need to be heard."

**- John**

### Be part of the change.

If you've felt inspired by these stories, contact us today and find out how you can be part of the change.



[www.healthwatchgloucestershire.co.uk](http://www.healthwatchgloucestershire.co.uk)



0123 456 78



[info@healthwatchgloucestershire.co.uk](mailto:info@healthwatchgloucestershire.co.uk)

# Thank you from our Manager

**As Healthwatch Gloucestershire Manager I am pleased to highlight our work over the last year.**

In April 2024, our contract moved to a new provider, TCF. I am proud of how our team and volunteers adapted to this change and continued our mission to listen to and understand people's health and social care experiences.

With this change, came opportunity, and we have been learning how new ways of working can allow us to be more flexible and responsive to feedback, to create more visible change by putting more voices in the public domain. We met Annie at a Pride event who was keen for us to share her experience of transitioning from male to female so that other people going through this would not feel alone (page 14). Annie said "I thought it was important I take the opportunity you've given to me to try at least get my story across to the right people at the NHS and you've done a really great job, I feel heard." We brought people's experiences of being diagnosed with Parkinson's disease to an ICB Board meeting which generated further engagement opportunities to ensure that people's voices are at the heart of the Neurology Clinical Programme Group. Our staff volunteered with organisations supporting people who are hidden homeless. Building trusted relationships in this way enabled people to share their experiences with us more openly.

The development of our Local Advisory Group also provides us with opportunities over the coming years to embed more diverse representation in our work and ensure that our priority projects address key issues impacting on people in Gloucestershire.



"Thank you to the HWG staff, our dedicated volunteers and Local Advisory Group members for all of their hard work this year, and to all of the members of the public who have trusted us to share their experiences and influence change in the health and care system."

**Lucy White, Healthwatch Gloucestershire Manager**

# Finance and future priorities

We receive funding from Gloucestershire County Council under the Health and Social Care Act 2012 to help us do our work.

## Our income and expenditure:

Income		Expenditure	
Annual grant from Government	£269,000	Expenditure on pay	£201,053
Additional income	£36,675	Non-pay expenditure	£38,024
		Office and management fee	£10,391
<b>Total income</b>	<b>£305,657</b>	<b>Total Expenditure</b>	<b>£249,468</b>

## Additional income is broken down into:

- £1,000 received from Healthwatch England for work around trans and non-binary people's access to GPs
- £35,657 received from NHS Gloucestershire ICB to support the engagement officer (ICS) post



# Finance and future priorities

## Next steps:

**Over the next year, we will keep 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 also 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.

## **Our top three priorities for the next year are:**

- Experience of Inpatients at Gloucestershire Royal Hospital
- Exploring attitudes and accessibility of the NHS App
- Children and Young People's mental health

# Statutory statements

**Healthwatch Gloucestershire is hosted by The Care Forum, The Vassall Centre, Gill Avenue, Fishponds, Bristol, BS16 2QQ.**

**Healthwatch Gloucestershire uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.**

## The way we work

### **Involvement of volunteers and lay people in our governance and decision-making.**

Our Healthwatch Local Advisory Group consists of 9 members who work voluntarily to provide direction, oversight, and scrutiny of our activities.

Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2024/25, the Board met 8 times and made decisions on matters such as priority work areas for the year ahead, and they prioritised issues to take forward at the ICB meetings, such as the challenges involved in understanding and navigating the services available to people. We ensure wider public involvement in deciding our work priorities.

## Methods and systems used across the year to obtain people's experiences

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services.

During 2024/25, we have been available by phone and email, provided a web form on our website and through social media, and attended meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website and share it on social media. We will provide hard copies on request and share these with people at any events we attend.

# Statutory statements

## Responses to recommendations

We did not have any providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by us to the Healthwatch England Committee, so there were no resulting reviews or investigations.

## Taking people's experiences to decision-makers

We ensure that people who can make decisions about services hear about the insights and experiences shared with us.

For example, in our local authority area, we take information to the Partnership Boards, Health and Wellbeing Board and the Gloucestershire Safeguarding Adults Board.

The ICS and local authority have a coterminous footprint and we are an integral part of the Working with People and Communities strategy so most of our insight and experiences are taken to decision makers in One Gloucestershire ICS. For example, we share information with the ICB and Gloucestershire County Council. We also share our data with Healthwatch England to help address health and care issues at a national level.

## Healthwatch representatives

Healthwatch Gloucestershire is represented on the Gloucestershire Health and Wellbeing Board by Lucy White, Healthwatch Gloucestershire Manager.

During 2024/25, our representative has effectively carried out this role by playing a full and active part in meetings, taking a systemwide view and making sure that the public, patient and service user voice is included in the thinking and decisions of the Board.

Healthwatch Gloucestershire is represented on Gloucestershire Integrated Care Partnerships by Lucy White, and we are regularly invited to present feedback to Gloucestershire Integrated Care Board, also represented by Lucy White, Healthwatch Gloucestershire Manager.

# Statutory statements

## Enter and view

Location	Reason for visit	What you did as a result
Care home – Knightsbridge Lodge, Cheltenham: <a href="https://www.healthwatchgloucestershire.co.uk/report/2025-05-30/enter-and-view-knightsbridge-lodge">https://www.healthwatchgloucestershire.co.uk/report/2025-05-30/enter-and-view-knightsbridge-lodge</a>	Part of our ongoing partnership working to support improving the patient experience across the country.	We wrote a report which recognised existing good practice and made recommendations around highlighting designated bays for disability parking and providing more accessible information for residents on menus and introducing a calendar in communal areas. The provider took this on board and acted immediately on many of the recommendations.

## 2024 – 2025 Outcomes

Project/activity	Outcomes achieved
Community Pharmacy in Gloucestershire: <a href="https://www.healthwatchgloucestershire.co.uk/report/2025-03-19/community-pharmacy-gloucestershire">https://www.healthwatchgloucestershire.co.uk/report/2025-03-19/community-pharmacy-gloucestershire</a>	We shared our report with NHS Gloucestershire who recognised that medicine shortages and supply issues are significant issues for patients and community pharmacies locally. They also acknowledged examples of both excellent and poor practice in terms of communications between GP practices and community pharmacies. They said that the Community Pharmacy Primary Care Network Engagement Leads are trying to influence and support the building of constructive working relationships and exploring new digital options which may offer solutions to this issue. The ICB also want to work with HWG to ascertain which population groups Pharmacy First communications need to be targeted at.

# Statutory statements

## 2024 – 2025 Outcomes

Project/activity	Outcomes achieved
<p>Annie's story:  <a href="https://www.healthwatchgloucestershire.co.uk/blog/2025-01-13/joined-health-and-social-care-services-annie">https://www.healthwatchgloucestershire.co.uk/blog/2025-01-13/joined-health-and-social-care-services-annie</a></p>	<p>We shared Annie's story with NHS Gloucestershire who have now held several workshops and are continuing to have conversations with the trans community in Gloucestershire about working toward a solution to ensuring people get the healthcare they need locally; access to blood testing and prescriptions through a local GP. We have been informed that anyone who has contacted PALS about their difficulties obtaining an urgent prescription, has now been able to get their medication.</p>
<p>Your experiences of living with Parkinson's disease:  <a href="https://www.healthwatchgloucestershire.co.uk/report/2025-03-31/your-experiences-living-parkinsons-disease">https://www.healthwatchgloucestershire.co.uk/report/2025-03-31/your-experiences-living-parkinsons-disease</a></p>	<p>We presented our findings at the ICB Board meeting in January. The Neurology Clinical Programme Group responded that services across both acute and community provision are working together with Parkinson's UK to develop group pilot sessions for newly diagnosed PD patients that are MDT led, focussing how to access clinical and practical support, the things that they can do to take care of themselves. They are also working with our booking / business intelligence teams to look more closely at our data, regarding wait times, appointments, appointment lengths etc to ensure we are working towards NICE guidelines. In addition, a jointly designed patient engagement piece of work is being developed between the ICB and Healthwatch, to gain a better understanding of patients experiences of the services that are provided, to ensure that any current and future work is patient – centred and focused around feedback.</p>

# Statutory statements

## 2024 – 2025 Outcomes

Project/activity	Outcomes achieved
Hidden Homelessness: <a href="https://www.healthwatchgloucestershire.co.uk/report/2025-06-06/report-understanding-peoples-experiences-hidden-homelessness">https://www.healthwatchgloucestershire.co.uk/report/2025-06-06/report-understanding-peoples-experiences-hidden-homelessness</a>	<p>In response to our report, we received a joint statement from One Gloucestershire Integrated Care System. They were pleased that we had highlighted the definition of what hidden homelessness includes and recognised that the numbers appear to be increasing. They told us that Gloucestershire’s aim is to help to build the foundations of closer partnership and enable a stronger, more resilient VCSE sector bringing opportunities to put in place some of the suggestions in this Report e.g. training for staff, increased capacity for advocacy.</p> <p>One of the ambitions of the Making Every Adult Matter work programme is to embed a trauma informed approach across the system, effecting systemic change in responding to complex issues. One Gloucestershire told us that whilst the initial cohort is focused on rough sleepers with complex emotional needs, the ambition is for the work to effect cultural, strategic, commissioning, ‘flexible responses’, ‘service improvement and workforce development’ changes that will positively impact on how the Gloucestershire system responds to people in vulnerable circumstances experiencing multiple disadvantages, including those who experience ‘hidden homelessness’.</p>



# Statutory statements

## 2024 – 2025 Outcomes

Project/activity	Outcomes achieved
Older adults: <a href="https://www.healthwatchgloucestershire.co.uk/report/2025-06-18/report-understanding-access-services-and-quality-life-older-adults">https://www.healthwatchgloucestershire.co.uk/report/2025-06-18/report-understanding-access-services-and-quality-life-older-adults</a>	We shared our report with the Ageing Well team whose response to our recommendations will guide their implementation of the Frailty Strategy across Gloucestershire. They are committed to enabling early conversations about planning for future needs, particularly for those aged 65–74, before health declines and working with partners to co-deliver future preparedness sessions, helping people make informed decisions about housing, care, and support. They will also work with providers to explicitly influence culturally appropriate delivery and ensure services remain accessible for people who choose not to use digital tools, maintaining face-to-face and telephone-based options.
Access to GPs booklet	We created and shared this booklet with the Local Medical Committee and NHS Gloucestershire who supported us to create the content, based on public feedback. The ICB have committed to fund the distribution of printed copies within GP practices. We are inviting people to feedback what might be useful to include in future editions, so they are co-produced as much as possible. <b>Publication expected July 2025.</b>
Dentistry data for local Healthwatch in the South West	We reported our feedback data to the NHS Local Dental Network throughout the year. They are using this data to make sure patient voice informs their decisions about development of NHS dental care.

**Healthwatch Gloucestershire**  
**The Vassall Centre**  
**Gill Avenue**  
**Fishponds**  
**Bristol**  
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