



Speaking up for better care

Healthwatch Gloucestershire annual report
2025/26

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A message from our CEO

This year we have:

- Engaged people living with long-term conditions, neurodivergent young people and communities facing barriers to care.
- Analysed experiences of primary care, hospital services, neurological conditions, mental health and digital healthcare.
- Shared evidence and recommendations with decision-makers to improve services, support pathways and patient experience.
- Amplified lived experiences to improve care, reduce inequalities and strengthen personalised support.
- Ensured community insight informed local strategy, service development and improvement priorities.
- Worked with Healthwatch partners to influence policy, contribute to research and strengthen the impact of public voice.



CEO, TCF
Kevin Peltonen-
Messenger



This year has been marked by uncertainty following proposals to close Local Healthwatch services and remove independent patient voice from health and care. Despite this, we have continued to champion the experiences of people across Gloucestershire, ensuring their voices influence local and national decision-making.

Through the dedication of our staff, volunteers and partners, we have improved understanding of neurological conditions, digital inclusion, neurodiversity, mental health and access to care, helping shape services that better reflect people's real experiences and needs.

A message from our commissioners

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

"Healthwatch Gloucestershire plays a vital role in ensuring the voices of people, carers and communities are heard and acted upon. Through targeted engagement and high-quality insight, they deepen our understanding of lived experience, including those seldom heard. This intelligence strengthens our adult social care quality assurance framework, informing commissioning and improvement. Their work supports a culture of listening, learning and acting, helping us evidence impact and ensure services are shaped by what matters most locally."

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

"As in previous years it has been a pleasure to work with the team at Healthwatch Gloucestershire over the past 12 months. They have pursued health and care topics that matter to the people and communities of Gloucestershire. A particular highlight this year has been the publication and promotion through GP practices across the county of the Healthwatch Gloucestershire guide: Top tips for accessing your GP practice. The guide was codeveloped with Healthwatch Gloucestershire with input from the ICB, GP Practice Patient Participation Groups and the Local Medical Committee. This guide will be invaluable for anyone in Gloucestershire trying to find out about services offered in primary care, including community pharmacy and NHS dentistry.

"A more targeted piece of work that the ICB was pleased to be able to respond to was the report highlighting the experiences of people living with Sjögren's syndrome. The ICB worked with primary and secondary care NHS colleagues, as well as members of the medicines team within the ICB, to develop a combined response to the recommendations made. The ICB looks forward to working with Healthwatch Gloucestershire and its sister Healthwatch in Bristol during what will be a period of change over the next 12 months for both ICBs and Healthwatches."

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

In 2025/2026 we supported more than 4400 people to have their say and get information about their care. We employed 5 staff and, our work was supported by 33 volunteers.



Reaching out:

Over 4000 people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

Nearly 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 8 reports about the improvements people would like to see in areas like hospital inpatient care, the NHS app and children and young people's mental health.

Our most popular report was ['Experiences of Parkinson's care in Gloucestershire'](#), highlighting people's struggles in getting timely referrals and information while waiting.



Statutory funding:

We're funded by Local authority in Gloucestershire. In 2025/26 we received £304,657, which is 13% 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 people's experiences of accessing urgent health and care services during Winter with the ICB as part of their 2024/25 Winter plan to inform strategy to improve capacity and patient experience for next year.

Recommendations made by our specially trained Enter and View volunteers about accessibility and safety were acted upon immediately when we visited Old Vicarage Care home to speak to their residents.

Summer

Through impartial evaluation, our Volunteer Readers Panel improved GLP-1 patient information resources for the Community Diabetes Service ensuring it was accessible and meaningful for patients.

Our GP information booklet, based on public feedback and co-developed with the ICB, LMC and patient groups, was published. It is now available on GP websites across the county empowering people to get the most out of their GP practice.

Autumn

Healthwatch's 2025 research on trans and non-binary people's experiences of GPs was referenced in Parliament by Wes Streeting and the NHSE as evidence of poor care for LGBT+ people that the NHS needs to improve.

We contributed public feedback from our Pharmacy engagement to the development of the Pharmaceutical Needs Assessment for the county to ensure that services provided can meet the needs of the population.

Winter

We have championed the voices of individuals facing multiple disadvantage in developing The Making Every Adult approach, supporting Gloucestershire services and systems to transform and improve lives.

The procurement of additional dental capacity in Gloucester City Centre has been supported by two of our volunteers acting as patient representatives within the Gloucestershire Dental Strategy alongside NHS leaders.

Working together for change

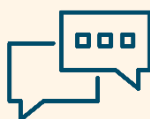
We've worked with other organisations to ensure people's experiences of care in Gloucestershire are heard at the Integrated Care System (ICS) level, and they influence decisions made about services at Gloucestershire ICS

A collaborative network of local Healthwatch



Feedback from Gloucestershire residents, alongside 1,717 people across 19 Local Healthwatch, areas highlighted the opportunities and risks within the NHS's ongoing digital transformation, particularly around digital inclusion, confidence, accessibility, and the future of independent feedback. The report has been shared with national policy makers including the NHS app design and research team, Peers of the House of Lords, and the Department of Health and Social Care.

A big conversation



With other Local Healthwatch, we participated in the Kings Fund research to understand what impact Healthwatch has had, what can be learnt from how it has worked, and explore what this means for the future of hearing from patients and users of services. The Kings Fund concluded that what replaces Healthwatch must retain independence and keep core conditions; gathering unsolicited, varied and rich community insight, including from seldom heard groups; and a geographical scale that supports both local insight and system or national-level influence.

Building strong relationships to achieve more



In response to our Hidden Homelessness report published in 2025, we collaborated with Feeding Gloucestershire to award winter Homelessness Support Fund grants to two local projects providing additional services to local residents over Christmas. The applications received exceeded 10 times the funding available, highlighting the challenges faced by these support services and the need and demand for such services to our Gloucestershire communities. This data has been shared with local commissioners to influence decision making about future funding opportunities.

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

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

Women diagnosed with Sjögren's syndrome spoke to us about their experiences of accessing support in Gloucestershire. Sjögren's is a condition where the glands that produce fluid, such as tears and spit (saliva), stop working properly. A lack of awareness often led to symptoms being misdiagnosed and treatment being delayed which has led to a deterioration in their health. By sharing their stories, they want to raise awareness of the condition, highlight how debilitating it can be and make access to treatment more equitable.



Getting services to involve the public

By involving local people, services help improve care for everyone.

We shared feedback with NHS Gloucestershire from people at risk of falls, and their carers, who were coming to us for advice due to struggling to navigate and access support available to them. In response to the issues people highlighted, NHS Gloucestershire developed a landing page on the ICB website with clearer advice on what to do when there's a concern about someone that's had a fall/is at risk of a fall and where to access help.



Improving care over time

Change takes time. We work behind the scenes with services to consistently raise issues and bring about change.

People with macular disease and sight loss told us that technology can be beneficial for people with sight loss. However, some things, like the NHS app, are not user friendly and people are concerned about how they will be able to communicate with their GP practice in the future. We connected them with their local GPs Patient Participant Groups so they can participate more effectively in the design of services going forward.

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.



Championing people's experiences of accessing Parkinson's care

What did we do?

Over 150 people with Parkinson's disease, and their carers, told us about what it's like living with the condition, and their experiences of the care they have received.

Key things we heard:

Waiting times for a diagnosis impacts people's physical and mental health.

The first three months following diagnosis are 'critical', with people feeling isolated and alone.

A lack of information and 'vagueness' leads people to feel they need to see a consultant more regularly.

Some people and their carers do not always feel included in decisions about treatment plans.



What difference did this make?

A new Neurology team leaflet is being finalised to improve clarity for patients. Consultants at Gloucestershire Hospitals NHS Foundation Trust have recently partnered with Parkinson's UK to refer all newly diagnosed patients to Parkinson's Connect, which offers tailored education and support. They are also committed to streamlining booking systems for consultant and specialist nurse appointments.

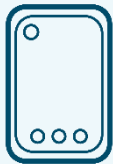
Parkinson's UK have reported positive outcomes due to increased uptake of Parkinson's nurses visiting groups with them to share information and respond to questions. We are supporting GHFT to promote a Trust-wide improvement project to ensure that all Time Critical Medications (TCM) are administered at the correct time, an issue that was also highlighted in our report.

Amplifying the voices of young women and girls who are ADHD or autistic

What we did

We worked with young women, girls and gender diverse young people who are ADHD or autistic, and organisations providing support services, to co-develop our engagement to help us understand their experiences of the assessment process, accessing support while waiting for an assessment, and support post diagnosis.

Key things we heard:



Traits were overlooked or minimised because they did not match stereotypical, male-centred understandings of autism and ADHD

Missed early recognition had long term impacts on wellbeing, education and self-understanding

Mental health needs were misunderstood. Some felt their distress was dismissed as “just part of being autistic or ADHD,” while others found their neurodivergent traits being overlooked as relating to poor mental health



“I don’t think overdiagnosis is a problem. I think there has been more information shared about what autism and ADHD are and how they can feel – especially for girls – and the more we share our stories, the more of us are seeing that we share those experiences.”

What difference did this make?

Gloucestershire County Council have directly referenced some of our findings as part of a review of their Local Offer and to improve SEND services for families, children and young people in Gloucestershire acknowledging the “really powerful insight, and it really delves into lived experiences.”

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:

- Working with system and community partners to raise awareness of Healthwatch Gloucestershire and what we do
- Attending community events and groups to build trust and develop meaningful relationships with people to reduce stigma
- 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



Impacts of social media, vaping and physical activity on children’s mental health

164 young people spoke to us about their wellbeing. Social media is an important way for young people to stay connected, but many said it also affects sleep, and raises safety concerns. While most young people we spoke to did not vape, there was a perception that it is common. Those that did vape said they do it to cope with stress or fit in socially, often despite believing it is harmful. Physical activity was the most beneficial in promoting positive mental health in young people helping reduce stress and improve mood, but barriers such as school workload, low confidence, cost, and transport often make it hard to be active regularly.

“People usually dismiss me and don’t listen.”

What difference did this make?

We are sharing our findings with Healthy Lifestyles to shape the design and delivery of a vaping pathway for young people living in Gloucestershire, and with the Public Health team and Children’s services in Gloucestershire to ensure that voices of young people are included in the development of future services through their ongoing work.

Advocating for better access to the NHS app

We investigated how accessible the NHS app is for people who don’t speak English as their first language by speaking with diverse communities across Gloucestershire. People see clear benefits to the NHS App but experience significant barriers—especially around language, usability, and lack of clear support. Those with limited English, lower digital skills, or a preference for human contact struggle most.

“I can speak and listen in English, but I cannot write or read it, so the NHS App is not accessible to me.”

They expressed a strong need for multi-language support and easy read resources. Very few people had heard of the Digital Support Hubs. When explained, many said they or their community would use this support, especially if it included language-appropriate help.

What difference did this make?

We have called on NHS Gloucestershire to work with GP practices to provide training on the NHS App for all staff, to ensure they can help patients with their queries, and continue to invest in digital support. Gloucestershire feedback has also been shared with the Department of Health and Social Care and NHS England as part of their “NHS online” consultation with Local Healthwatch.

Information and signposting

When you're struggling to find an NHS dentist, looking for help about how to make a complaint, or need advice about a good care home for a loved one – we're your first port of call.

This year nearly 500 people have reached out to us for advice, support or help finding services. These conversations also help us to understand where, and how, your care can be made better.

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



Ensuring people have the right care at home to regain their independence

We heard from patients receiving Cancer treatment who were told that they were not eligible for Reablement support on being discharged from hospital. One person was not offered any support at home on being discharged from hospital, despite requesting it, as they were unable to mobilise independently following surgery. They said they were encouraged to rely on neighbours and frail parents for support at home. Another person, who was offered a care package, was told their care at home would be free of charge but later received a bill from Adult Social Care for £3000.

After being signposted, the individuals have made complaints that are being investigated. We also shared this feedback directly with Adult Social Care who are reviewing whether this is a gap in information, advice and guidance.



“I’m still in a wheelchair and am being taken daily by ambulance to Cheltenham Hospital for radiation treatment. This invoice is causing me so much stress and worry. At no time was I informed there would be any charge for the care they were providing. I didn’t organise it, THEY did.”

Improving inpatient experience at Gloucestershire Royal Hospital

Daphne came to us following a negative experience of inpatient care after she had a fall at home as she did not know where else to turn. She described feeling that she, and other patients, were ‘neglected’ by the staff on the ward when they asked for support with personal care or tried to raise concerns.

We shared Daphne’s feedback anonymously and followed up with an Enter and View visit to do our own observations and speak to people admitted to the Trauma and Orthopaedic Wards at Gloucestershire Royal Hospital about their experiences. We were able to see where the ward had changed some of their practice as a result of the specific issues we raised on Daphne’s behalf, which had a direct positive influence on the care that was being delivered to patients on the day of our visit.



“I don’t like to make complaints and I’m worried that if I need to go back into hospital, it could be used against me.”

Showcasing volunteer impact

Our fantastic volunteers have given 572 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 community centres
- Carried out and view visits to Gloucestershire Royal Hospital and 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 Frailty self-assessment tool for use in Primary Care
- Connected with University of Gloucestershire biomedical science students to provide firsthand insights into experiences with hospital and pathology services



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.

"As an Enter and View volunteer it was very rewarding to visit care homes and hospitals to gather people's experience of their care and to be able to make recommendations for improvement. We know that any recommendations we make have to be considered so it feels very worthwhile."

"I've enjoyed reading draft patient/ cater leaflets produced by health and social care providers and having the opportunity to make suggestions on how they will be easier to read and understand. This is also work that can be done at any time so doesn't require an ongoing commitment."

"When my father who had dementia died, I decided to volunteer to campaign for better dementia care."

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



0800 652 5193



info@healthwatchgloucestershire.co.uk

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	£304,657	Expenditure on pay	£265,169
Additional income	£40,000	Non-pay expenditure	£55,139
		Office and management fee	£8,453
Total income	£344,657	Total Expenditure	£328,761

Additional income is broken down into:

- £40,000 brought forward from previous year

Finance and future priorities

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:

1. Do you feel listened to and involved in your care and treatment?
2. How and why people use AI for health information and advice, and people's attitudes to and experiences of AI use in health and social care administration
3. Men's health and wellbeing services: Focus on fatherhood

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 Local Advisory Group (LAG) consists of nine members who work voluntarily to provide direction, oversight, and scrutiny of our activities.

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

Throughout 2025/26, the LAG met five times and made decisions on matters such as priority work areas for the year ahead, and they prioritised issues to take to public committee meetings like HOSC. 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 2025/26, 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 2025/26, 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 Partnership by Lucy White, and we have been 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
<p>Old Vicarage Care home</p> <p>www.healthwatchgloucestershire.co.uk/report/2025-08-11/enter-and-view-old-vicarage</p>	<p>Part of our ongoing partnership working to support improving the patient experiences across the county.</p>	<p>We wrote a report with recommendations about improving accessibility and health and safety for residents while building work was being carried out. The provider acted immediately to mark out designated disabled parking spaces and add signage to outdoor areas. They have also purchased and installed a dementia-friendly clock, supporting better time awareness and orientation</p>
<p>Gloucestershire Royal Hospital: Respiratory ward</p> <p>www.healthwatchgloucestershire.co.uk/report/2025-11-25/enter-and-view-gloucestershire-royal-hospital-respiratory-unit</p>	<p>We planned a series of visits to Gloucestershire Royal Hospital in response to our priority around inpatient experience.</p>	<p>We wrote a report with recommendations. Since receiving the feedback, the wards have improved and streamlined information provision for patients and relatives by creating headings on noticeboards to ensure they clearly display the specific information for the target audience. They are also committed to continuing their involvement in the de-conditioning improvement work through collaboration with their multidisciplinary teams.</p>

Statutory statements

Enter and view

Location	Reason for visit	What you did as a result
Gloucestershire Royal Hospital: Trauma and Orthopaedic wards www.healthwatchgloucestershire.co.uk/report/2026-04-09/enter-and-view-gloucestershire-royal-hospital	We planned a series of visits to Gloucestershire Royal Hospital in response to our priority around inpatient experience.	We wrote a report with recommendations in response to which the wards have now implemented a one page 'In patient' guide that is attached to every bed, including how to complain, information on Martha's Rule, and details of who to contact for updates. Each ward is in the process of purchasing clocks showing the day, date, and time to support patient orientation and they have committed to exploring the development of a Trauma & Orthopaedics-specific discharge pack to complement the Trust-wide documentation.

Statutory statements

2025 – 2026 Outcomes

Project/activity	Outcomes achieved
<p>Understanding people's experiences of accessing support for ADHD www.healthwatchgloucestershire.co.uk/report/2025-09-24/report-understanding-peoples-experiences-accessing-support-adhd</p>	<p>One Gloucestershire assured us that the recommendations are being discussed by healthcare partners across the One Gloucestershire system. They said they are working together with system partners to improve the process through the new self-referral pathway for adults to Gloucestershire Health and Care NHS Foundation Trust. The improvements will enable adults who are suspecting ADHD to bypass a GP appointment. They also provided information on support available to people while waiting and clarified that many Right To Choose assessments offer a remote option which does not inhibit access based on geography.</p>
<p>Trans and non-binary peoples' experience of accessing GPs in Gloucestershire www.healthwatchgloucestershire.co.uk/report/2025-09-10/report-trans-and-non-binary-peoples-experience-accessing-gps-gloucestershire</p>	<p>NHS Gloucestershire ICB acknowledged disappointment that accessing national specialist care remains unresolved, with very long waits for a first appointment. They also recognised the failure of NHS services is forcing people to self-medicate and seek private provision. The ICB have supported a number of trans people under the care of an NHS Gender Identity Clinic who have had recent problems accessing hormone replacement therapy to access appropriate care and medication. The ICB also provided signposting information for individuals who want to change their name or gender marker.</p>

Statutory statements

2025 – 2026 Outcomes

<p>Experiences of Parkinson’s care in Gloucestershire www.healthwatchgloucestershire.co.uk/report/2026-02-19/report-experiences-parkinsons-care-gloucestershire</p>	<p>A new Neurology team leaflet is being finalised to improve clarity for patients and Consultants at Gloucestershire Hospitals NHS Foundation Trust have recently partnered with Parkinson’s UK to refer all newly diagnosed patients to Parkinson’s Connect, which offers tailored education and support. They are also committed to streamlining booking systems for consultant and specialist nurse appointments.</p> <p>Parkinson’s UK have reported positive outcomes due to increased uptake of Parkinson’s nurses visiting groups with them to share information and respond to questions. We are supporting GHFT to promote a Trust-wide improvement project to ensure that all Time Critical Medications (TCM) are administered at the correct time, an issue that was also highlighted in our report.</p>
<p>Exploring attitudes and accessibility of the NHS app/NHS app Local Healthwatch Working together report www.healthwatchgloucestershire.co.uk/report/2026-06-11/report-exploring-attitudes-and-accessibility-nhs-app</p>	<p>The national report has been shared with national policy makers including the NHS app design and research team and Peers of the House of Lords. Gloucestershire feedback has also been shared with the Department of Health and Social Care and NHS England as part of their “NHS online” consultation with Local Healthwatch. NHS Gloucestershire’s digital team is working with local GPs to support practical approaches to patient access and functionality of the NHS App across the county.</p>
<p>Experiences of people living with Sjögren’s syndrome in Gloucestershire www.healthwatchgloucestershire.co.uk/report/2026-05-26/report-experiences-people-living-sjogrens-syndrome</p>	<p>While there are references to Sjogren’s Syndrome in several places on G-Care relating to other conditions, currently there is no dedicated G-Care link for Sjogren’s Syndrome. The ICB will explore the possibility of this further with system partners. Consultant rheumatologists working in Gloucestershire are working to strengthen specialist input and develop a more structured local pathway. The Trust recognises the burden specialist cases being referred out of county can place on patients and are exploring opportunities to develop this capability locally over time. GHT is also organising an educational session with a national expert to support the Gloucestershire team’s awareness and to explore emerging developments in management.</p>

Statutory statements

2025 – 2026 Outcomes

<p>Understanding the gendered experiences of young people with autism and ADHD</p> <p>www.healthwatchgloucestershire.co.uk/report/2026-06-19/report-understanding-gendered-experiences-young-people-autism-and-adhd</p>	<p>Gloucestershire Health and Care Trust told us they are working closely with system partners to develop a needs led approach that supports personalised adaptations and support for all young people, which will include training offers for professionals. They are also updating their website to reflect the work they are doing to take a personalised approach to understanding need and recognising differences and how these present and impact across contexts. They also updated us on work with the CAMHS Parent Support Team to develop a relational neuro affirming based parenting approach to support families when their children are experiencing big emotions. Gloucestershire County Council have directly referenced some of our findings as part of a review of their Local Offer and to improve SEND services for families.</p>
<p>Digital habits, physical activity and vaping: unpacking their impact on mental health in Gloucestershire youth</p> <p>www.healthwatchgloucestershire.co.uk/report/2026-06-24/report-children-young-people-mental-health</p>	<p>We are sharing our findings with Healthy Lifestyles to shape the design and delivery of a vaping pathway for young people living in Gloucestershire, and with the Public Health team and Children’s services in Gloucestershire to ensure that voices of young people are included in the development of future services through their ongoing work.</p>
<p>Top tips for accessing your GP practice</p> <p>https://www.healthwatchgloucestershire.co.uk/advice-and-information/2025-07-09/top-tips-accessing-your-gp-practice</p>	<p>We published this co-developed booklet to coincide with the publication of the annual GP survey results so that NHS Gloucestershire could signpost people to it in their public communications. The Local Medical Committee, NHS Gloucestershire and patient groups supported us to create the content, based on public feedback. With their support it has been published on GP practice websites across Gloucestershire.</p>

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