DISABILITY, NEURODIVERGENCE AND MENTAL HEALTH IN GLOUCESTERSHIRE

Spring 2026
Issue 10

Incorporating news and updates from Gloucestershire's Partnership Boards & Partners

Welcome to the Spring 2026 edition of Disability, Neurodivergence, and Mental Health in Gloucestershire.

For those very observant — no, you didn't miss the winter edition. Due to newsletter timings, it made sense to label it our spring issue.

As we begin a new year of work across Gloucestershire, this is a moment to pause, reflect, and look ahead together. This edition gives a flavour of the energy and commitment across our Partnership Boards and networks. You'll read about new roles, new projects and ongoing collaboration - from employment support for neurodivergent young people, to developments in mental health forums, to preparations for Big Health Day 2026. A clear thread runs throughout: People coming together to shape services with, not just for, our communities.

Co-production is not new to us. This year, we are determined to make it unmistakably visible in how we plan, decide and act. Amy's appointment as Adult Social Care's new Co-production Lead (a big welcome!) reflects part of that commitment across the system - she will be working closely with the partnership boards as part of her role. The Partnerships team for the NHS GCHFT is also a good example of other parts of the systems' active commitment to co-production. On these positive notes it's also important to remember co-production really a mindset - It must shape everyday conversations, challenge and share problem-solving, ensure lived experience is genuinely heard, respected and shapes priorities, decisions and change.

Thank you to everyone who contributes, participates and stays involved. We look forward to working together throughout the year ahead.

Finally, please don't forget any contributions and thoughts for this newsletter are warmly welcomed!

Andrew Cotterill

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New Co-production Lead

Introducing Amy Rees.

Hi, I'm Amy, and I am Co-production Lead for Gloucestershire County Council's Adult Social Care directorate. This is a new role for adult social care, so I'm very much looking forward to working with teams and communities to embed and realise our commitment to co-production.

I've been working alongside people to elevate voice, experience, participation and co-production for over 10 years. Through co-production work, directly supporting people, and my Trustee positions, I have been lucky to have met so many wonderful people from diverse backgrounds and experiences. I'm thrilled to have the opportunity to do this within my own community in Gloucestershire. I have lived experience of mental health and was able to draw on my own experience in my role as Trustee for the Independent Mental Health Network, and through peer support groups.

In my role, I lead on all aspects of co-production across adult social care, working alongside people drawing on services, carers, and colleagues. I'm focused on building and maintaining positive relationships across the adult social care footprint and supporting the work of partnership boards and associated forums.

In practice this means:

- Developing a new co-production network and participation opportunities
- Driving the way that lived experience and feedback from people drawing on services is used to shape and improve services and initiatives
- Working strategically to embed co-production
- Advising on and sharing best practice around co-production
- Supporting the learning and development of adult social care colleagues to co-produce
- Supporting initiatives that empower people drawing on services to have an active role in co-production
- Upholding the rights of people in Gloucestershire with care and support needs

Talk to me about:

- Co-producing adult social care projects and initiatives
- Connecting with the work of the partnership boards
- Developing you/your teams skills to co-produce or work alongside people with lived experience

Amy.rees@gloucestershire.gov.uk

Big Health Day 2026

Big Health Day
The next Big Health Day is on Thursday 11 June 2026 (9.30am-2pm).
It will be at its usual venue: Oxstalls Sports Centre, Plock Court, Gloucester, GL2 9DW.

Big Health Day is an annual event for people with a physical or learning disability, sensory loss or mental health support needs. It aims to be a fun and inclusive event which encourages people to participate in sport, physical exercise and social activities and to engage with services and organisations which can provide support. It has run for 17 years at different venues. For the last few years it has been held at Oxstalls Sports Park in Gloucester. A short summary of Big Health day 2025 can be found later in this newsletter (p19).
The aim of each Big Health Day is to:

- To deliver an inclusive event with the theme of staying healthy and active, meeting friends and having fun.
- To reduce health inequalities for people living with a learning disability, a physical disability and/or mental health problems

There will be stalls from many different organisations (120 in 2025), offering useful information and support. As usual the partnership boards will also be represented. There will also be lots of inclusive sports and activities for people to take part in.

If you want to contribute to the event, please contact our Partnerships Team using the event email bighealthday@ghc.nhs.uk

For more information on the big health day, please see the 2026 Big Health Day Website.

Healthwatch - get involved

Healthwatch.

Help decide our Healthwatch Gloucestershire health and social care priorities for 2026–27

Having analysed what people told us in 2025, we have selected four possible topics under the theme of Access to Health and Social Care services. By taking part in this, you help decide our priorities based on real experiences, not just service decisions. To find out more and access our poll and feedback forms, please click on this link: https://www.healthwatchgloucestershire.co.uk/news/2026-02-06/help-decide-our-health-and-social-care-priorities-2026-27

New Healthwatch Gloucestershire project:

Exploring Lifestyle Behaviours and Mental Health in Young People (11–18) in Gloucestershire

Healthwatch Gloucestershire are working on a new project to hear directly from young people aged 11–18 about their experiences of mental health support, physical activity, vaping, and the impact of social media on their wellbeing.

We want to understand what's working well, the challenges young people face, and where support and services could be improved. This includes:

- Access to mental health and wellbeing support
- Opportunities and barriers to being active and exercising
- Experiences and influences around vaping
- The effects of social media

By listening to young people's views and experiences, we aim to highlight key issues and share recommendations to help shape more accessible, supportive, and youth-friendly services across Gloucestershire.

We would love to hear your thoughts through our online Survey.
We are also looking for opportunities to hear directly from young people where they are, so if you are running a group or activity, we would love to be involved in supporting you with this.

Call us on 0800 652 5193 or email us: info@healthwatchgloucestershire.co.uk

healthwatch Gloucestershire

Autism Strategy 2022 - 2026 Updates

Gloucestershire's Autism / Neurodivergence Partnership Board brings together people with lived and professional experience of autism and neurodivergence to oversee the implementation of the local Autism strategy. Our local priorities reflect the six overarching themes of the National Autism Strategy. Some of this quarter's highlights are shown below.

Theme 2 Highlights

Improve access to education & support positive transitions into adulthood

- The Children's Autism and ADHD have been strengthening their transition process from children's to adults services, focussing on helping children and young people build relationships with the adult team before they move over (either for diagnosis or ADHD medication review). We continue to work closely with education to understand how we can work collaboratively to best support neurodivergent children in the school environment.

Theme 3 Highlights

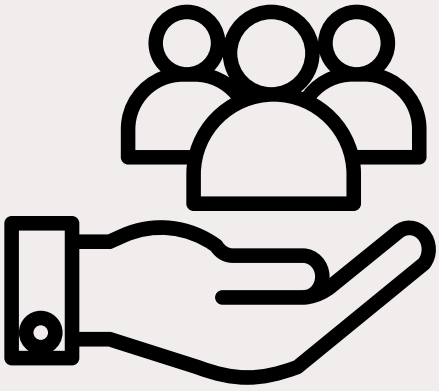
Support more people into employment

- The Employment and Skills Hub had 179 referrals where Autism was declared as their main disability since 1st April 2025 – 31st January 2026
- Supported 25 individuals into paid employment and 21 into work experience or voluntary placements
- Planned Employment focused session for the partnership board.

Theme 5 Highlights

Tackle health & care inequalities

- Rethink has conducted a number of local forums on Neurodivergence and mental health needs. Results will be shared in the next newsletter.
- Gloucestershire health and care foundation trust has developed and begun delivering training for the Allied Health teams to reduce health treatement inequalities - Neurodivergence has had core representation.



News from CASA

The Community Autism Support and Advice (CASA) team would like to introduce you to Summer Vergara who works on our annual physical health check project for those with a serious mental illness as the coordinator. Summer comes to us with a background in mental health nursing and has supported us to develop and deliver our Autism and Me course.

At CASA we have experienced an increase in demand for our services, particularly asking for support to understand autism and how it impacts them. As a response to this, we have developed a course that will support those who have been diagnosed either through Right to Choose or privately and therefore have not had the opportunity to access the post diagnostic autism course run by the diagnostic service.

The course will be held online running for 6 weeks with each session lasting for two hours. We are limiting the spaces per group to eight participants and our first 3 cohorts are now fully booked. We plan to run 4 cohorts through the year. These next dates will be advertised in due course.

The topics covered during the sessions include an Introduction to Autism & Communication, Relationships, Routines, Sensory Processing, wellbeing and reasonable adjustments.

The Gloucestershire NHS Autism Diagnostics Service has welcomed this work, as it helps ensure that everyone has access to post-diagnostic support, including those diagnosed through Right to Choose or privately.

CASA
Community Autism Support & Advice

CONTACTS

Email: infocasa@grcc.org.uk || Phone: 01452 317460 (Monday to Friday 9.00am – 4.30pm).
For more information, and links to leaflets and resources, visit https://www.grcc.org.uk/CASA.
For support groups and drop-ins, please see the dates for you diary page later in the newsletter.

Young Peoples News

Introducing Propel Gloucestershire

Propel Gloucestershire is a 12-month programme supporting neurodivergent young people aged 14-25 along their vocational journey, helping to bridge the gap between schools and potential employers. To achieve this we work with:

- Schools to support teachers to explore careers with a strength-based approach and also work directly with young people through a series of workshops.
- Employers to equip them with neuroinclusion skills through CPD training and supporting helping them support current neurodivergent employees and young people.

We then act as a conduit and introduce schools and employers to facilitate conversations around the workplace opportunities the employers can provide e.g. site visits, career workshops, group project, work experience and volunteering.

The funding we have received (from Barnwood Trust) is allowing us to provide:
1. direct support for 30-45 young people across three partner schools (Alderman Knight School, Cheltenham Bournside School, and All Saints Academy).
Each participant receives:

- 10 interactive workshops building confidence, strengths awareness, and work-readiness
- Individual vocational profiling matched to their aspirations and abilities
- Real workplace opportunities including visits, employee conversations, volunteering, taster days, and placements
- Individual progression plans with clear next steps toward employment, apprenticeships, or further training

2. Asset mapping of Gloucestershire's SEND careers infrastructure. We will have conversations with the County Council SEND transition teams, Careers and Enterprise Company, local supported employment providers, and disability organisations to understand how Propel can compliment current provision and where we can help fill gaps and integrate sustainably with existing provision.

3. Employer engagement — recruiting 4-6 local employers across diverse sectors, providing inclusive recruitment guidance and workplace adjustment support to create lasting local inclusion champions.

4 Evidence and evaluation — generating robust data through validated tools (WEMWBS, work-readiness assessments), case studies, and focus group feedback to inform county-wide expansion.

Neurodivergent Masking by Andrew

Masking: the hidden work of fitting in

Someone may look calm, sociable, and capable – while internally working very hard to manage. They may be following the conversation, monitoring their facial expression, trying to sound "right," holding back a stim, tolerating sensory discomfort, and rehearsing what to say next – all at the same time. What others see is not always showing the effort it takes.

This hidden effort is often described as masking or camouflaging. It can help someone get through situations, avoid harm, or meet expectations – but it can also come at a significant cost.

What masking / camouflaging means

In everyday language, "masking" and "camouflaging" are often used interchangeably to describe efforts to hide or suppress natural neurodivergent traits or responses, or to use learned strategies to compensate, in order to fit in, stay safe, or be accepted. Examples might include:

- copying social behaviour from others
- rehearsing conversations in advance
- forcing or faking eye contact
- monitoring tone of voice, facial expression, posture, or gestures
- suppressing stimming or other traits
- trying not to show confusion, overwhelm, or sensory discomfort
- learning scripts for work meetings, phone calls, or social situations

For some people this is very conscious ("I have to remember to do X so I seem normal enough"). For others it becomes more automatic over time – almost like a habit developed through repeated social pressure. Masking is not simply "being polite" or "behaving professionally." It is often a much more intense level of self-monitoring and adaptation.

A useful distinction. Most people adjust how they present themselves in different situations (for example at work, with strangers, or in formal settings). That is a normal part of social life.

The masking described here is usually more than ordinary social adaptation. It often involves ongoing self-monitoring and suppression of natural communication, movement, sensory needs, or regulation strategies in order to avoid negative consequences such as rejection, misunderstanding, bullying, or loss of opportunities. It may feel less optional, be used more often, and come with a much higher cost (such as exhaustion, anxiety, or burnout).

Why people mask

This is the most important part to understand: people usually mask for reasons, not because they are being dishonest. Common reasons include.

- safety (including emotional safety)
- avoiding bullying, exclusion, or rejection
- keeping a job or getting through interviews
- avoiding being misunderstood, judged, or treated differently
- trying to meet social, school, family, or workplace expectations
- previous negative experiences (being corrected, mocked, punished, or dismissed).

Masking by Andrew

If someone has repeatedly learned that their natural communication, movement, sensory needs, or reactions are seen as "wrong," masking can become a way of managing risk.
In that sense, masking is often a survival strategy or an adaptation – not a character flaw.
Masking often develops in response to stigma, social pressure, or repeated negative reactions, which is why acceptance and understanding can reduce the need for it.

What masking can look like in everyday life

Masking can look different depending on the person, situation, and what feels safest. A few common examples:

- Seeming chatty and "fine" at work, then crashing at home. A person may use a lot of energy to get through meetings, small talk, and social expectations, then need silence, recovery time, or withdrawal afterwards.
- Copying other people's expressions, phrases, or reactions. This can be a way of navigating social uncertainty and reducing the chance of "getting it wrong."
- Scripting phone calls or meetings. Some people prepare exact wording, rehearse likely responses, or write prompts in advance.
- Suppressing stimming until alone. A person may stop themselves from moving, fidgeting, pacing, humming, or using other regulating actions because they worry how it will be seen.
- Forcing tolerance of sensory discomfort. Enduring painful noise, bright lights, scratchy clothes, crowded spaces, or strong smells to avoid seeming "difficult."

Sometimes masking is so familiar that the person themselves may not immediately realise how much they are doing.

The pressures may look different across ages. For example, school and peer dynamics in childhood / adolescence, and workplace or relationship expectations in adulthood – but the underlying drivers of safety and belonging are often similar.

Gender differences. Masking affects all genders, but research consistently shows higher self-reported camouflaging in autistic girls and women. This is thought to be one contributing factor – among others, including historical diagnostic bias and gender stereotypes – in why neurodivergence (e.g. Autism) in girls and women is more likely to be missed or diagnosed later.

The costs of masking

Masking may help someone get through a situation in the short term. But when it becomes constant, necessary, and unsupported, the cost can be high. Possible impacts include:

- Exhaustion and burnout: Continuous self-monitoring and suppression of needs can be deeply draining.
- Anxiety and hypervigilance: If someone is always scanning for how they are coming across, or whether they are "passing," their nervous system may stay on high alert.
- Loss of identity: Some people describe feeling unsure what is "really them" after years of adapting to others' expectations.
- Delayed diagnosis or missed support: If someone appears to be coping on the outside, professionals, teachers, employers – and even family – may underestimate their difficulties and support needs.
- Relationships based on performance rather than authenticity: It can be hard to feel truly known if most interactions involve careful self-editing.
- Underestimation of support needs: People may think, "You seem fine," without seeing the recovery time, distress, or effort behind that appearance.

Masking by Andrew

A person can be functioning in public and still paying a heavy price in private. Research most consistently shows links between higher camouflaging and poorer mental health outcomes (including anxiety and depression), with lower wellbeing also reported. Many people also describe burnout and post-demand “crashes”. Note, most studies are associational, however, so they don’t prove cause and effect.

Masking is not all-or-nothing

It helps to avoid overly simple messages here. Masking is not always a clear yes/no, and it is not always experienced in the same way. Some forms of compensation or adaptation can be useful. Many people use strategies to navigate social or professional situations, and that is not necessarily a problem in itself.

The issue is usually when it becomes constant, necessary, and costly – when a person feels they cannot be safe, accepted, or successful without ongoing self-suppression.

So this is not about saying “all masking is bad.” It is about recognising when the pressure to mask is harming someone.

How to reduce the need for masking

A key goal is not to force people to “unmask” on demand. It is to create environments where less masking is needed in the first place.

Practical ways to reduce masking pressure include:

- Use clearer communication: Be more direct, specific, and less reliant on hidden meanings.
- Reduce pressure for eye contact: Listening does not always look like eye contact.
- Offer flexible ways to contribute: Let people respond verbally, in writing, or after a pause.
- Accept stimming and breaks: Self-regulation is not bad behaviour.
- Make sensory adjustments where possible: Consider noise, lighting, seating, and timing.
- Reduce social performance expectations: Not everyone can or should be expected to present in the same way.
- Use predictable agendas and expectations: Knowing what is coming reduces stress and frees up energy for actual participation.

In short: when environments become safer, clearer, and more flexible, people often need less camouflage.

Closing takeaway

If someone seems fine on the outside, that does not tell you how much effort it is costing them. Masking can be an understandable strategy for getting through a world that is not always safe or accommodating. But when the burden becomes chronic, the cost can be exhaustion, anxiety, burnout, and missed support.

The most helpful response is not to judge the person for masking – or for struggling – but to create environments where they do not have to work so hard just to be accepted.

SELECTED RESOURCES

Here you'll find some neurodivergent resources that may be of interest.

Please be aware that content linked to from this page is not necessarily provided by us, we cannot guarantee that all the content is perfect - merely that we hope you might find it of interest!

YouTuber of the issue!

Mom on the Spectrum

Taylor is a late-diagnosed autistic mom, creator, and educator learning how to live more gently while getting to know my neurodivergent brain.

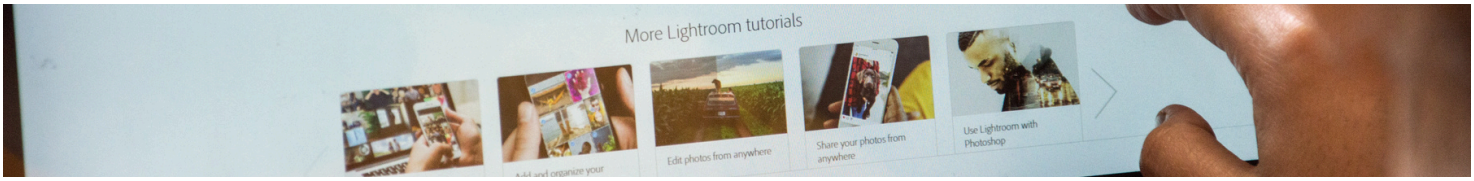
She provides family and lived-experience videos from an autistic parent and family perspective.

Youtube Channel:
https://www.youtube.com/@MomontheSpectrum

Theme based resources of the issue!

A few links to articles and resources on Masking

- **Autism Central: "Masking and identity"** (useful for the identity angle + links out to other reputable resources/webinars). https://www.autismcentral.org.uk/guidance/masking-and-identity
- **NHS Cambridgeshire & Peterborough ND Digital Library: "Masking"** (simple explanation with child/young person examples; good for families and schools). https://www.justonenorfolk.nhs.uk/nd-digital-library/understanding-neurodiversity/masking/
- **CAT-Q (Camouflaging Autistic Traits Questionnaire for adults).** This is a 25-item research-validated self-report measure developed from autistic **adults'** lived experiences of masking/camouflaging; it assesses compensation, masking, and assimilation behaviours but is not a diagnostic tool for autism. PDF version is On line version here: https://cat-q.org/ or https://embrace-autism.com/cat-q/



DATES FOR YOUR DIARY

Here are support groups, meet ups or events happening around Gloucestershire. Let us know if you need anything relevant adding.

Churchdown Autism Group
Meets at Churchdown community centre on the first Thursday of the month from 14:00-15:30. Contact rachel.hodges-cox@nhs.net or cashmir.martin@nhs.net.

Community Autism Support and Advice (CASA) support groups and drop-ins
For weekly updates about our Drop-in Groups and full details of drop-in venues and times, see our pages on Instagram and Facebook:
https://www.instagram.com/casagloucestershire/
https://www.facebook.com/CASAGloucestershire

Gloucestershire ND Hub Events
Various events and activities for young and adults
See ND Hub Events

Gloucestershire Parent Carer Forum 'Listen To Me' Social Meet-ups
Various locations - for more information visit www.glosparentcarerforum.org.uk.

The Youth Forum
The Youth Forum is for neurodivergent young people between the ages of 13 and 19. It is about having your say about how things can be better in Gloucestershire. Held as a monthly Zoom group it meets on a Tuesday evening between 5.30pm and 6.30pm. If you want to join, a parent or guardian needs to complete a consent form. For more information, email: emilyl@inclusion-glos.org.

Your next Autism (and Neurodivergence) Partnership Board

Tuesday 3 March 2026
10.00am to 12.30pm
Venue: Zoom [Online]

Main Topic:
Employment

Future Partnership Board Date:
2 June 2026, 10am - 12.30am
Likely Central Topics around Young People
[Online]

WANT TO JOIN THE PARTNERSHIP BOARD?

WE MEET ONCE PER QUARTER. IF YOU WOULD LIKE TO COME TO OUR NEXT MEETING, **EMAIL**: NEURODIVERSITY@GLOUCESTERSHIRE.GOV.UK.

MORE INFORMATION

TO FIND OUT MORE, AS WELL AS READ PREVIOUS NEWSLETTERS, VISIT: HTTPS://GLOUCESTERSHIRE.GOV.UK/HEALTH-AND-SOCIAL-CARE/DISABILITIES/AUTISM-PARTNERSHIP-BOARD/

Partnership Board Update

From your Chairs:

Tammy Flook and Jan Marriott

A warm welcome to the New LDPB Co-chair ...

Hi I'm Tammy Flook,
I'm the newly appointed Co-chair of the Learning Disability Partnership Board (LDPB).

I'm involved in many projects at Inclusion Gloucestershire including Drama, Travel Training and Quality Checking.

When I'm not working I enjoy drama, going to see musicals and watching plays. I also like reading books and going on holiday with my family.

I am looking forward to chairing the LDPB as I was the chair of Gloucestershire Voices before it became Inclusion Gloucestershire. I have lots of experience, including going to meetings and I'm very good at speaking out when necessary.

Other introductions for those who will be working closely with us:

Amy Rees – Coproduction Lead in Adult Social Care at GCC
This is a new role which Amy started in January. She will be working closely with all the Partnership Boards, being the main link between the boards and GCC. Going forward, Amy will have a 'working together' standing agenda item at the LDPB and PD&SI PB.

Rosie Mockford – new Strategic Health Facilitator at GHC
Rosie started this role in December 2025, replacing Simon Shorrick. She is also keen to work closely with the LDPB and re-start the Health Action Group.

We are thrilled to have Tammy, Amy and Rosie involved with the Partnership Boards

Partnership Board Update

From your Chairs:
Tammy Flook and Jan Marriott

A note from the December 2025 LDPB meeting
One of our speakers was Helen from Artlift who came to talk about the Creative Cancer Awareness project. This is a trial project funded by the NHS. The project looks to see if doing arts and crafts activities makes it easier for people to have difficult conversations.

The project planning group decided to focus on Bowel Cancer. The project planning group includes Experts by Experience and a group of people from the NHS in Gloucestershire, including the Learning Disability Screening Nurse. It is important people with a learning disability know about healthy eating, healthy poo and what to do if they find blood in their poo. The planning group decided people can make clay pots or use magazines to make collages. The project plans to run 3 workshops, each for 20 people. The workshops are also for carers.

There was an in person meeting of the LDPB on Monday 23rd February 2026
Topics and presentations that were covered:

- Working together update (Amy Rees)
- What people would like to see at the next Big Health Day
- A presentation from the GCC Safeguarding Team
- The GHC Partnerships Team – the learning disabilities services review.

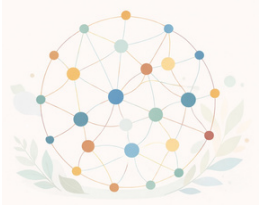
Date for the diary: Online 'mini' LDPB meeting
When: Tuesday 17th March 2:30 – 3:30pm
Where: via Zoom
Topics and presentations:

- Juliet from POhWER is coming to explain more about the work they do.

- Simon (from GCC) is coming to talk to the board about how they can help design a conference about a law called the Mental Capacity Act (MCA)

Partnership Board Update

From your Chair: Jan Marriott
And the Mental Health Partnership Board Team



The Mental Health and Wellbeing Partnership Board met 15th January 2025. This was the first meeting facilitated and supported by the Coproduction Team of Rethink. 40 people from a wide variety of backgrounds, including lived experience, attended.

Jan Marriott, one of the independent Co-Chairs shared the news that the NHS Integrated Care Board would no longer be providing any resources, apart from staff engagement, to the Partnership Boards. Dr Mala Ubhi assured us that she would anticipate continued close working between the ICB Mental Health Clinical Programme Group, or whatever it became, and the Board.

Thankfully Gloucestershire County Council continue to be committed to the Boards and have agree to pick up all the resourcing. In addition they have appointed a Coproduction Lead to work with the Boards and to support the implementation of the ethos of the Coproduction Charter into Adult Social Care. Naomi Carley shared the commissioning vision for the relationships between the more strategic county-wide Partnership Board and the relatively new local Mental Health Forums. The latter are locality-led and are shaped by participant's priorities which will then feed into the Partnership Board for system-wide discussion and change. Board members were very keen to see the Board continue in this way and felt it was essential in times of turbulence as a mechanism for integration.

Joining the Mental Health & Wellbeing Partnership Board.
If anyone is interested in the joining the Board or Network meetings please email: **asc.co-production@gloucestershire.gov.uk.**

Partnership Board Update

From your Chair: Jan Marriott
And the Mental Health Partnership Board Team

Simon Price, the other Co-Chair, led a discussion on key priorities for the coming year. They came from Board members; previous stakeholder/network events and the locality forums. People with lived experience have therefore had a strong voice in them. The following were agreed:

- Patient Care Race Equality Framework
- Housing
- Criminal justice
- Employment
- Stigma and discrimination/advocacy
- Community Mental Health Transformation
- Suicide prevention
- Infrastructure and ecosystem development
- Mental Health Act reform
- Feeback from MHELO and the Forums
- Better services to support peoples' mental health and wellbeing

Other suggestions were social care; a mechanism to hold and share learning and lived experience stories; more supervision and support for practitioners in the voluntary and other sectors; barriers to accessing services
If people would like to comment or have suggestions on how we might work together on priorities please contact Jan on janmarriott@outlook.com or Simon on simon.price@ghc.nhs.uk

Karl Gluck explained why the County Council had decided to bring back mental health social workers into adult social care after many years of being part of NHS Mental Health Services. Once the service transfers back to the Council there is a commitment to ensure the new model of social work is coproduced with us all. Karl and Naomi would welcome suggestions on how best to take the coproduction forward so please any ideas to Karl.Gluck@gloucestershire.gov.uk or Naomi.Carley@gloucestershire.gov.uk

Kathleen Hanbury, the MEAM (Making Every Adult Matter) Coordinator gave an update on the plans to ensure people with multiple disadvantage leading to homelessness etc., can have their needs better met in a more integrated and person-centred/led way. Anyone interested in getting involved can contact Kathleen on Kathleen.Hanbury@gloucestershire.gov.uk

Partnership Board Update

From your Chair: Jan Marriott
And the Mental Health Partnership Board Team

Looking for Co-facilitators.
We are excited to announce that we are looking for 5 x Lived Experience Co-facilitators for the Gloucestershire Mental Health Forums. The last newletter introduced them.

There are 5 roles available, one in each locality of: Cheltenham, Cotswolds, Forest of Dean, Gloucester, and Stroud.
Involvement payments of £150 per day are available. The total time required by the role is 6 days over 6 months (click here for more information about timings and payment).

The Gloucestershire Mental Health Forums are where a mix of people come together to think about actions that could improve the lives of local people affected by mental ill health. People who come to the Forums altogether have a wide range of knowledge, perspectives and ideas for action.

Experts by Experience (people with lived experience of mental ill health, including those with caring experience) are central to the activities of the Mental Health Forums.
The purpose of the Lived Experience Co-Facilitator roles are to plan, facilitate and reflect on the locality Mental Health Forums with the other facilitators.

A key part of the role is to hold space in the Forums for collective lived experience information, insight and priorities. We're looking for people who can do this in a balanced way, considering a range of perspectives and priorities.

Those who are interested in the roles should get in touch with Rhiannon on rhiannon.davis@rethink.org by Monday 13th April 2026

(These Lived Experience Co-Facilitator roles are supported by Rethink and are in addition to the MHELO Expert by Experience participation roles for the Forums, which have been engaged separately).

Joining the Mental Health & Wellbeing Partnership Board.
If anyone is interested in the joining the Board or Network meetings please email: **asc.co-production@gloucestershire.gov.uk.**

Partnership Board Update

From your Co-Chairs: Katie Peacock and Jan Marriott

A Packed Start to 2026 for the Physical & Sensory Impairment Partnership Board
The first Physical and Sensory Impairment Partnership Board meeting of 2026 got off to a brilliant start, with a full agenda, inspiring speakers, and lots of shared learning. A huge thank you to everyone who presented, contributed, and took part. The breadth of work happening across Gloucestershire was genuinely energising.

Accessibility & Authentic inclusion for the deaf community.
We were delighted to hear from Gloucestershire Deaf Association (GDA), who shared powerful insights into accessibility from the perspective of the deaf community. Gilson led a thought-provoking and engaging presentation, challenging common misconceptions and encouraging us all to think beyond tick-box accessibility. The session focused on what true inclusion looks like in practice, shaped by lived experience rather than assumptions.

GDA also highlighted the deaf awareness and accessibility training they offer to voluntary and community sector organisations across Gloucestershire. A real reminder that learning and listening are key to doing better.

Big Health Day 2025 – Bigger, Brighter, Better
Sophie Ayre shared an uplifting report on Big Health Day 2025, which welcomed over 1,600 visitors, up from around 1,450 the year before. Started back in 2008, Big Health Day has grown into a vibrant, inclusive celebration of health, wellbeing, and community. Originally focused on people with physical and learning disabilities, it now also supports people with sensory impairments, mental health needs, and long-term health conditions.

What made 2025 special?

- Over 120 volunteers supported the day.
- 120 stalls offering advice, information, and support.
- 12 inclusive sports and activities.
- 130+ health checks delivered.
- Private consultation rooms introduced for the first time.
- A 9% attendee feedback rate, up from 2% in 2024.

Feedback showed that many attendees felt more confident, more informed about their health, and more socially connected after the event. The Big Health Day continues to play an important role in reducing health inequalities

You can see information about the 2026 Big Health Day on Page 3 of this Newsletter.

Partnership Board Update

From your Co-Chairs: Katie Peacock and Jan Marriott

Funding That Makes a Difference

We also heard from Barnwood Trust, with updates on funding opportunities for disabled people and people with mental health conditions in Gloucestershire.
Their Grants for Individuals programme focuses on enjoyment and enrichment opportunities, essential household items, and helping people live fuller, more independent lives.

Also highlighted was the opportunity for organisations and groups to apply for longer term grants that support Gloucestershire to be a truly inclusive community fit for the future...
If you would like more information on Barwood Trust's grant programmes, visit their website: barnwoodtrust.org/

Why Social Care and Justice Matter

Jackie Martel from Access Social Care delivered a powerful reminder of what social care really means. Social care helps people live safe, independent, and fulfilling lives, yet demand is rising faster than the system can cope.

Access Social Care provides free legal advice, raises awareness of rights, and supports people when things go wrong. Their vision is a future where social care is properly funded and accessible to all.

Looking Ahead

This first meeting of 2026 showcased just how much positive, collaborative work is happening across Gloucestershire. Thank you again to everyone involved. We're excited for what the rest of the year will bring.

Neurology Subgroup Update

From your Neurology Subgroup Co-Chairs:
Jan Marriott and Dave Evans

Educating us about Neurological Conditions: Since our last update, we have learnt about:

- Parkinson's Disease - Homepage | Parkinson's UK
- Progressive Supranuclear Palsy (PSP) and Corticobasal Degeneration (CBD) - with presentations from representatives of Parkinson's UK and PSPA https://www.pspassociation.org.uk/

Information about the conditions, diagnosis and support available was shared, and some good connections were made to share good practice. They are also keen to work together to benefit the people they support.

Frame Running is a fantastic Gloucester activity. Frame Running Giants was set up to enable people with mobility challenges freedom to move and enjoy activity safely. For more information about it and sessions being held, check out their website: https://frgg.org.uk/

ME/CFS (Myalgic Encephalomyelitis also known as Chronic Fatigue Syndrome) Friendship Group updated that NHS England has delivered 3 training modules, including one on managing severe ME/CFS. The group is keen to get this training known as widely as possible amongst healthcare providers. There is also work being done nationally to commission a service for severe patients, and NHS England are looking at specifications for mild and moderate services. Everything happening nationally will be relevant for local people and services.

Going Forward: Following the changes within Gloucestershire County Council's Commissioning Team, support for the Neurology Subgroup is changing. The Co-Chairs and members would like to continue meeting to discuss and act on the important issues that challenge people with neurological conditions. We also don't want to lose the important connections we have already made with people with lived experience, health and social care professionals and the range professionals from charitable and other organisations who support people with neurological conditions.

We're not sure how the subgroup will work with the new Co-production Lead once they are in post, but we can update in the next Newsletter.

For more information:
Physical Disability & Sensory Impairment Partnership Board: partnershipboards@inclusion-glos.org
Neurology Subgroup: asc.co-production@gloucestershire.gov.uk

Gloucestershire Carers Hub

Gloucestershire Carers Hub supports unpaid Carers throughout the county of Gloucestershire.

We cover the you if you live in Gloucestershire, or if you support someone who lives in Gloucestershire but you live out of county

You maybe be supporting someone with physical or emotional needs, they could be living independently from you but require your support on a daily or weekly basis. This could be due to ill health, frailty, mental health or due to an addiction. They may also live in residential care/ support but you remain an active part of their support network.

There is no minimum requirement for the number of hours which you are supporting someone for. You may be supporting them:

- Via the telephone offering emotional support
- Taking someone to appointments
- Supporting with cooking, cleaning, shopping and other daily tasks
- Assisting with dressing, cleaning and other personal care needs
- Going in to check on someone regularly

Whatever you do to support someone else you are a Carer even if you don't think of yourself as one. The individual who you are supporting could be:

- A family member; spouse, husband, wife, child, adult child or partner
- A friend
- A neighbour
- An ex-partner

Whoever you are supporting we are here to offer advice, information and support to you to enable you to think about your needs whilst offering support to someone else.

If there are a number of people supporting someone, we welcome anyone providing support to someone to register with us to access information, support and our services.

If you look on the website, you can see the range of support that you can recieve from us along with up to date news from us. If you are not already, why not get in contact with us:

Call us 0300 111 9000 or email carers@peopleplus.co.uk

or refer yourself by clicking here: Self Referral – Gloucestershire Carers Hub

Our Montly Programmes (see the carers hub website for the latest)

Gloucestershire Carers Hub is here to support unpaid carers with a range of friendly and informative sessions. Our monthly programmes includes such as opportunities to connect with other carers, learn practical tips for managing your caring role, and take time for your own wellbeing.

The March programme is available here: Be-connected-march-2026

For full details and booking, visit Gloucestershire Carers Hub or call 0300 111 9000.