

Report to:	NHS Somerset Integrated Care	Agenda item	С
	Board		
	ICB Board Part A		
<b>Date of Meeting:</b>	27 November 2025		

Title of Report:	Chief Executive Board Report
Report Author:	Jonathan Higman, Chief Executive
Board / Director Sponsor:	Jonathan Higman, Chief Executive
Appendices:	

Report classification	Not confidential	
ICB body corporate	NHS Somerset Integrated Care Board	
ICS NHS organisations	NHS Somerset Integrated Care Board	
only		
Wider system	Somerset Integrated Care System	

Purpose:	Description	Select (x)
Decision	To formally receive a report and approve its	
	recommendations	
Discussion	To discuss, in depth, a report noting its implications	X
Assurance	To assure the Board that systems and processes are in	
	place, or to advise a gap along with a remedy	
Noting	For noting without the need for discussion	X

Previous	Date	Please clarify the purpose
consideration by:		

#### 1 Purpose of this paper

This report provides the Board with an update on the latest strategic developments across the NHS and more locally any relevant developments within the South-West Region, our Cluster and Somerset.

#### 2 Summary of recommendations and any additional actions required

The strategic focus of this report is the delivery of the 10-year health plan reforms, the priorities for the second half of the year and planning for the future of the NHS. Specifically:

- The NHS change and transition programme impacting on NHS England and Integrated Care Boards.
- The priorities for the second half of the 2025/26 financial year.
- The medium-term planning framework

The Board is recommended to **NOTE and DISCUSS** the content of this report.



#### 3 Legal/regulatory implications

Failure to operate within the statute and regulatory framework would lead to the system being placed in special measures. Consequently, losing the capability to make local decisions for local communities.

#### 4 Risks

Failure to understand the wider strategic and political context, could lead to the Board making decisions that fail to create a sustainable system. The Board also needs to seek assurance that credible plans are developed to ensure any significant strategic and operational risks are addressed.

#### 5 Quality and resources impact

Failure to assess key strategic and operational developments against the quality and resource impacts for the Cluster and NHS Somerset ICB, would place the system at risk in terms of its sustainability. The Board needs to be assured that developed impacts have been assessed and significant impacts are addressed.

6 Confirmation of completion of Equalities and Quality Impact Assessment Not applicable.

#### 7 Communications and Engagement Considerations

This report is published for public information and includes relevant updates and the latest news from the NHS England, Somerset NHS providers, Council partners and the Voluntary, Community and Social Enterprise sector.

#### 8 Statement on confidentiality of report

OFFICIAL, for public release.



#### **Chief Executive Board Report – Part A**

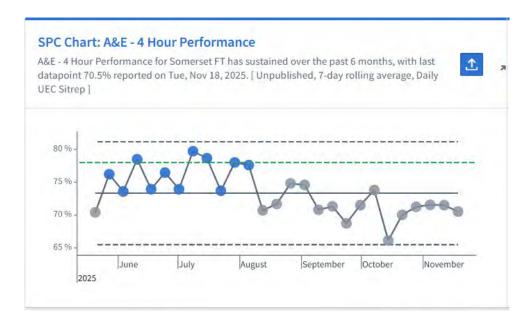
#### 1 INTRODUCTION

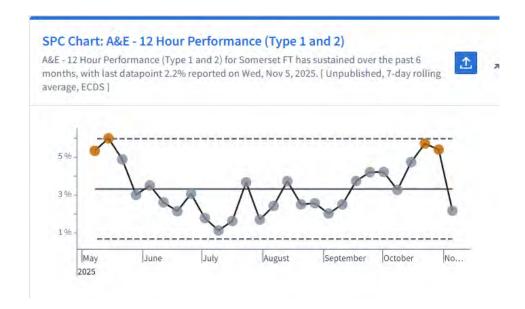
1.1 This report provides the Board with an overview of the latest strategic developments across the NHS and more locally across the Cluster, and Somerset Integrated Care System. It also includes a summary on the system performance during this reporting period with further detail provided in the Board performance report.

#### 2 SYSTEM PERFORMANCE OVERVIEW AND KEY ISSUES

- 2.1 The operational focus is now fully on ensuring the safe management of the winter months, and the risks associated with this. Demand across our urgent and emergency care services remain high, with additional pressure being felt as a result of the earlier than usual presentation of Winter Flu and the ongoing Resident Doctors industrial action.
- 2.2 During the most recent period there has been sustained improvement against a number of the key urgent and emergency care metrics including ambulance handover times, ambulance response times and the number of patients waiting over 12 hours for admission within our emergency departments. The number of patients in hospital awaiting placement for on-ward care remains a key risk and there have been recent challenges relating to the delivery of the agreed trajectory to improve waiting times in our Emergency Departments (the A&E 4-hour standard). The year-to-date position on a number of the key metrics is demonstrated by the run charts below with further detail provided in the full performance report. It should be noted that the most recent points in the data presented below are unvalidated.
- 2.3 Following improvement earlier in the year, performance against the A&E 4-hour standard has deteriorated over the late summer and early autumn months. For the year to 17 November, Somerset NHS Foundation Trust performance was at 73.4% against the 78% national standard. This is also behind our locally agreed operational plan target. 12-hour performance has improved following an increase in October and the average ambulance handover times at hospitals in Somerset is 26.4 minutes for the year to date which benchmarks favourably against other systems and represents a significant improvement on the position this time last year.

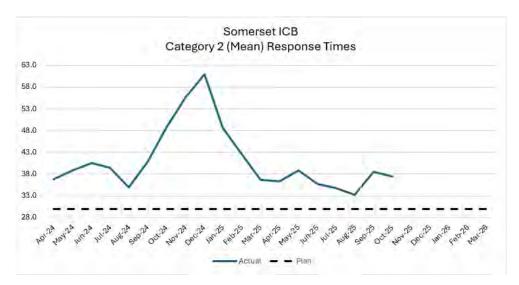






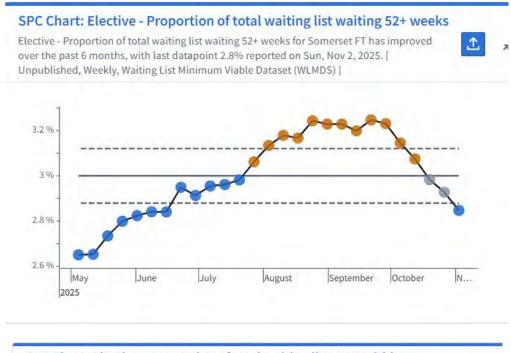
2.4 Across the South West Region the improvement in Category 2 ambulance response times has continued to be sustained. This is reflected in Somerset where Cat 2 response (mean) times were 34.6 minutes in November (to 16th November). This reflects a significant improvement in year.

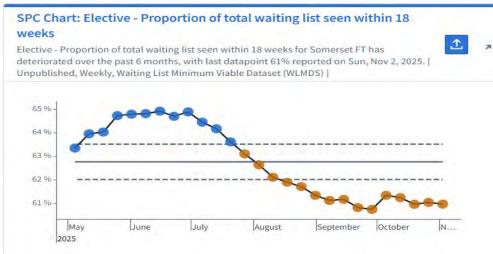




- 2.5 As part of the 2025/26 operational planning process the (planned) elective care priorities have reverted back to improving delivery against the 18-week referral to treatment target and reducing the proportion of people on the waiting list waiting over 52 weeks for treatment. At the end of September 2025 there were 57,935 patients at Somerset FT and 67,883 Somerset residents waiting for elective treatment.
- 2.6 The most recent available data, covering the period to 9 November 2025, demonstrates significant deterioration in performance against the 18-week referral to treatment standard across the summer months. This stands at 61.4% for Somerset residents and 61.1% at Somerset FT against the national standard of 65%. A particular focus has been on reducing the number of patients waiting in excess of 52 weeks for planned treatment. At the most recent data point 2.4% of people on the Somerset waiting list had waited over 52 weeks and 2.8% of people at Somerset FT had waited over 52 weeks. The agreed target is to reduce this to 1.5% by the end of March 2026. Additionally, Somerset NHS Foundation Trust is working to eliminate any patient waiting longer than 65 weeks.
- 2.7 Work continues with Somerset FT on mitigating actions, following the good progress made earlier in the year







2.8 Work is underway across the Somerset system to develop the 2026/27 operational plan, which is a 3-year plan spanning finance, operational performance and workforce. Alongside this is the development of a 5-year strategic commissioning and 5-year (provider) Delivery plan. Further details on this timescale and progress on this work will be provided at the meeting.

#### 3 STRATEGIC UPDATE – NATIONAL & REGIONAL CONTEXT

# Single Joint Executive Team for Department of Health and Social Care (DHSC) and NHS England.

3.1 The 10 Year Health Plan set out a reform of the NHS operating model to shift power closer to patients and communities. A key change is the creation of a single joint executive team being established across DHSC and NHS England, as part of the transition to one organisation. This will provide unified



leadership across both organisations and will simplify governance and align strategy with delivery. Further details of the executive team is available here: Joint executive team to be set up across DHSC and NHS England - GOV.UK

#### Second half of year - 2025/26

3.2 Sir Jim Mackey, CEO of NHS England, has written to ICB and Provider Chairs and CEOs to set out the progress achieved so far, and key priorities for the rest of this financial year: <a href="Building on our progress">Building on our progress</a> in the second half of 2025/26. Across the NHS in England there has been encouraging progress over the last six months, particularly in stabilising the financial position and improving performance in key areas. The task over the next 6 months is maintaining grip on finances, accelerating recovery in elective and urgent care, and preparing for winter pressures. In support of this, NHS England is undertaking a Mid-Year Review meeting with each NHS System to review their progress and delivery of operational plans to the end of the year.

#### **NHS England Medium Term Planning Framework**

3.3 NHS England have published the Medium Term Planning Framework for 2026/27 to 2028/29 The framework marks a shift from short-term operational cycles to a longer-term, locally led approach to improvement, aligned to the ambitions of the 10 Year Health Plan. It introduces a multi-year funding settlement, a revised operating model, and a focus on local innovation, prevention, digital transformation, and quality of care.

Key national priorities include:

- Financial discipline: 3% real-terms revenue growth and 3.2% capital funding, with all systems to achieve balance or surplus by 2029 and deliver at least 2% annual productivity gains.
- Operating model: Empowering Integrated Care Boards (ICBs) and NHS
  Providers to deliver integrated, prevention-focused care through eight
  strategic themes: local integration, neighbourhood health, prevention, digital
  transformation, quality improvement, patient experience, workforce and
  leadership renewal, and embedding genomics and research.
- Operational delivery: 15 national success measures will underpin performance monitoring through the NHS Oversight Framework, supported by new technical guidance and productivity tools.
- Systems are required to develop three-year operational, workforce, and financial plans, and five-year commissioning and provider delivery plans.
   Initial submissions are expected by December 2025, with final versions by January 2026.

#### Tackling racism, including antisemitism

3.4 The government has announced an urgent review of antisemitism and all forms of racism in the NHS, as part of its wider efforts to tackle discrimination in the health services: tackle antisemitism and other racism in the NHS. NHS England have written to ICBs and Providers to implement initiatives that



support the NHS's shared commitment to fostering an inclusive, respectful, and professional environment – for colleagues, patients and visitors – across the NHS and assuring our communities of our commitment to tackling hatred in all its forms: <a href="NHS England">NHS England</a> » Request for action on racism including antisemitism. In line with this NHS England is adopting the International Holocaust Remembrance Alliance working definition of antisemitism and has encouraged all NHS organisations to adopt this definition.

#### **Strategic Commissioning Framework**

3.5 On 4 November 2025, NHS England published its Strategic Commissioning Framework. This is an important document which sets out what NHS England expects from Integrated Care Boards (ICBs) in the strategic commissioner role, and what ICBs and providers can expect from NHS England, as part of a step-by-step guide with an up-to-date commissioning cycle. The framework will be followed by a complementary co-produced strategic commissioning development programme, to identify and build the skills and capabilities needed within ICBs for successful strategic commissioning.

#### Flu vaccinations

- 3.6 Flu vaccination is one of the best tools we have to protect the health of our patients and staff, easing winter pressures and reducing the risk of avoidable disruption to NHS services. The UK Health Security Agency's (UKHSA's) surveillance data published on 30 October 2025 showed a significant increase in flu levels across England, largely driven by a spike among school-aged children and a 2.9% increase on this time last year.
- 3.7 As of 13 November 2025, NHS teams across Somerset have delivered over 190,000 flu vaccines so far this autumn (eligible population 343,211). We have seen an increase in uptake compared to last year in almost all cohorts, with particular success for vaccination of pregnant women, and would encourage anyone who may be eligible, such as those with clinical risk, or those over 65, to come forward as soon as possible to receive their vaccination.
- 3.8 Appointments and walk-in sessions are available in local pharmacies, GP practices and community clinic drop-in centres across the country. People can book their vaccinations via the booking service webpage <a href="Vaccination and booking services">Vaccination and booking services</a> NHS or by calling 119.

#### 4. SOMERSET SYSTEM

#### Chief Nurse - Somerset NHS Foundation Trust

4.1 We are pleased to welcome Professor Deirdre Fowler, who recently joined Somerset NHS Foundation Trust as Chief Nurse and Midwife. Deirdre brings a wealth of experience from her previous role at University Hospitals Bristol and Weston NHS Foundation Trust, where she served in the same capacity.



4.2 Since joining the Trust, Deirdre has been actively engaging with colleagues across the Trust and familiarising herself with the wider Somerset community. She has expressed strong enthusiasm for Somerset's strategic direction—particularly the commitment to neighbourhood-based, person-centred care and the integrated approach to population health.

#### Attention Deficit Hyperactivity Disorder (ADHD) Taskforce

- 4.3 An independent taskforce established to tackle challenges in attention deficit hyperactivity disorder (ADHD) care published its final report on the 6 November 2025.
- 4.4 The ADHD Taskforce Final Report assessed services across health, education, employment, and the criminal justice system. The independent report recognises that cross-sector services across the country are under significant pressure due to the growing number of people seeking assessment and support which has resulted in long waits for diagnosis and treatment.
- 4.5 Since the publication of the interim report earlier this year, NHS England has already been working with local systems to implement key recommendations and improve care for people with ADHD.
- 4.6 Through the Medium-Term Planning Framework, NHS England has set clear expectations for local Integrated Care Boards (ICBs) and Trusts to improve access, experience, and outcomes for ADHD services over the next three years, focusing on improving quality and productivity.
- 4.7 The Taskforce's final report makes a series of recommendations to transform ADHD services across England, many of which require cross-government collaboration.
- 4.8 It calls for ADHD to be recognised and treated as a common condition, supported by new diagnosis models to help reduce waiting lists and that professionals across healthcare including GPs should receive more training on recognising symptoms and having an appropriate role in treatment.
- 4.9 The report also highlights the need for stronger collaboration between government departments across health, education, employment, and criminal justice to ensure more joined-up support.
- 4.10 NHS Somerset will work with partners to consider the ADHD task force recommendations, identifying opportunities to reduce escalation of needs and improve outcomes for adults, children, and families. We will also work to address service capacity and waiting times, exploring care models, shared care responsibilities and digital solutions, starting with actions that can be delivered within existing structures and resources.



### Medium-term Planning Framework: Revenue Finance and Contracting Guidance

- 4.11 The Revenue and Contracting Guidance to support the Medium-term plan was issued on 17 November. The guidance sets out the financial vision for delivering the 10 Year Health Plan for England, with ICB allocations moving towards their target distribution ('fair share') over the period of the NHS revenue settlement to 2028/29. As part of this, deficit support funding for ICBs and NHS trusts will also be removed.
- 4.12 The guidance sets out that to deliver the ambitions set out in the 10 Year Health Plan, ensuring better care for patients and greater value for taxpayers, the consistent and rigorous focus on driving improvement, cutting waste and getting value from every pound spent over each year of the multi-year planning round. To support this, the NHS payment scheme consultation proposes to continue the 2% general efficiency factor in 2026/27.
- 4.13 The guidance sets out where the information required to complete plans is confirmed and where planning assumptions should be used. It also makes clear where information is available for 2026/27 only and separate assumptions should be used for 2027/28 and 2028/29.
- 4.14 The funding changes are being worked through, and an update will be shared with the Finance Committee.

#### **Medium Term Planning Framework: Board Assurance Statement**

- 4.15 As part of the operational planning process, both ICB and Provider Boards need to complete a Board Assurance statement, covering the key expectations and the role of the Board as outlined in the Planning Framework. This statement covers: Foundation Activities (phase 1, pre-planning activities), Governance and Leadership, Plan Development, Productivity, Risk, NHS Standard Contract and Commissioning and Workforce. The first cut of plans is due for submission to NHS England on 17<sup>th</sup> December 2025.
- 4.16 The statements are required as part of the draft and final submission; the first submission to be based on Boards being engaged in the planning process. The final Board Assurance Statement is likely to differ slightly and is still under development and is to provide complete assurance of the plan outcomes and also expected to include additional requirements such as overall plan alignment and the development of strategic plans.

#### **Resident Doctor's Industrial Action**

4.17 There has been another period of resident doctors industrial action lasting a total of five days from 14th November. Cancellations and disruption were kept to a minimum with colleagues at Somerset NHS Foundation Trust, once again, mounting a significant effort to keep patients safe and well cared for. The local turn out for the strike was on average 55% of the usual resident



- doctor workforce and elective performance was maintained at 99% of planned activity.
- 4.18 The government and NHS England remain committed to improving the working lives of resident doctors, as it does for all staff groups, and is working with Trusts, including SFT, to put in place ways to best support this. The threat of further industrial action unfortunately remains.

#### **ICB Organisational Change Update**

- 4.19 This update reflects the Transition Programme status as of 19 November 2025, while noting the pace and complexity of delivery, and that developments may occur between this report's preparation and the Board meeting.
- 4.20 Since the last update to Board the strategic commissioning framework was published on 4 November 2025 (see 3.5 above).
- 4.21 Notably, the most significant development is the national announcement that the Treasury has agreed to fund the cost of change within the current financial year. As a result, we must now accelerate the timeline to develop an appropriate Target Operating Model (TOM), initiate the voluntary redundancy (VR) process, finalise organisational structures, and proceed with the implementation of compulsory redundancies to achieve the £19 per head of population target in 2026/27. The specific budget envelopes for our cluster are included in the recently received financial allocations for 2026/27 and the implications of this are being worked through.
- 4.22 Given the recent announcements and revised timetable, work on the TOM has been rapidly reset and realigned. This work is being led by Graham Atkins, Chief People Officer, NHS Somerset. Graham is leaving the ICB at the end of January and therefore is not conflicted with the executive consultation running concurrently. As a former partner in management consultancy, he also has specific skills and experience to do this type of work.
- 4.23 This work will review the functional requirements of a strategic commissioning organisation and the associated budgets. Aligning with planned reductions that will form part of the documentation and consultation required to support the VR process due to commence in early December, subject to Remuneration Committee approval. It is anticipated that that colleagues successful with VR applications will leave the organisation before the end of March 2026.
- 4.24 Additional design activity is scheduled to begin across relevant functions to define the structures necessary to initiate the Compulsory Redundancy process and associated consultation. At this stage our planning assumption is that we will aim to enter all staff consultation in late February 2026.
- 4.25 In addition, the consultation for Very Senior Managers (VSM) was launched on 12 November and will conclude shortly. It is anticipated that the new VSM structure will be in place from January 2026.



- 4.26 A new workstream has been added within the Cluster Programme, Workstream 6: Digital, Data, Technology and Analytics, has been established to assess the digital and data infrastructure required to support the TOM, given the sometimes-lengthy timeframes for technology migrations. The team is currently developing a detailed plan and identifying the appropriate leads to progress this work.
- 4.27 Further information on each workstream is available on request.

#### 5. COMMUNICATIONS AND ENGAGEMENT UPDATE

- 5.1 NHS Somerset Communications and Engagement team Highlights and Impact Report 2025 is attached as Appendix 1.
- 5.2 The Communications and Engagement Spotlight is attached as Appendix 2.
- 5.3 The Somerset Big Conversation summary of initial findings is attached as Appendix 3.
- 5.4 The November 2025 stakeholder update for the reconfiguration of stroke services in Somerset is attached as Appendix 4.

Appendices		
Appendix 1	NHS Somerset Communications and Engagement team Highlights and Impact Report 2025	
Appendix 2	Communications and Engagement Spotlight Report	
Appendix 3	The Somerset Big Conversation summary of initial findings	
Appendix 4	Stroke Reconfiguration Stakeholder Update	

#### APPENDIX 1

2025 Communications and Engagement Highlights

Ensuring your voice is heard to make Somerset a healthier place to live

How your stories are shaping better services Helping you to live healthier lives Navigating times of challenge together



# SHAPING YOUR CARE Our biggest ever year of listening to people in Somerset

From community services and cancer screening to data usage and diabetes, we have travelled 100s of miles across the county and engaged online to seek the views of local people. We work with our partners and communities to make sure feedback is shared with those running and improving services in Somerset.



We are putting your voice at the heart of everything we do. Your feedback is shaping services now.

20,000 pieces of feedback gathered and reviewed 7 grants
to voluntary
partners for
targeted
engagement

100 in-person engagement events 3.1 million views on our social media posts

Your feedback in action









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The right support after leaving hospital – shaped by your feedback

Smokefree Somerset – your stories helping more pregnant women to quit New approach to weight management – we listened, we learned GP access – your experiences informed new practice services in local communities, including procuring a new contract for Minehead Medical Centre

2025 Communications and Engagement Highlights - Shaping the future of care

Our listening roadshow, Somerset's Big Conversation, took us to the heart of communities across the county



Over 5,000 pieces of feedback gathered 33 in-person events

Captured attention with 3,230 interactions on social media

#### 2 interactive online activities

Where should Pauline recover after her operation?



How should we spend your money in Somerset?



# a health service fit for the future

### 10 Year Health Plan Engagement

#### **Key findings:**

- Strong support for all three shifts (community care, digital transformation, prevention) only if backed by proper funding, staffing, and infrastructure.
- Access and inequalities you are concerned about rural transport, digital exclusion, long waits for GP and dental care, and workforce shortages.
- Tackle long waits and boost mental health you want us to address surgical backlogs and improve access to mental health services.

4,541 individual pieces of feedback gathered



**49** in-person workforce and public engagement events



**3** "Lunch and Learn" workforce sessions



**37,281** views of our content on social media



**Nearly 1,000** social media responses

#### **Early findings:**

- You want more joined-up local community services easier access close to home, coordinated support, and neighbourhood hubs to reduce travel. You told us things work better in some areas than others
- Concern about access and waiting times you want clearer routes into services, quicker responses and more consistent information.
- Staying well and tackling inequalities you want more early help to prevent illness and you have said some communities struggle to access help more than others
- Using our online activity you said you want:
  - → Less funding for hospital and institutional care
  - → More funding for local hubs, community spaces and home-based support

#### 2025 Communications and Engagement Highlights - Communications priorities helping you to live healthier lives

#### **Promoting life-saving** vaccinations

Mums -to-be in **Bridawater** shared why they got the jab

Lina reached 47,750 people on **Facebook** 



mumsnet to reach families

Lina, aged 3, our new social media influencer, showed preschoolers how easy it is to get a flu vaccine. She went viral and was shared by NHS England and other ICBs.

Our simple checklist cut through the confusion around eligibility changes, reaching 64,760 people and was shared by other ICBs across the country.



We are currently smashing our targets for flu vaccination rates, helping protect our communities and shield busy hospitals.



#### **Player ready?**

We took to gaming platform 🛂 to target 18-25-year-olds for an HPV catch-up vaccination campaign, reaching 40,000 users.

Supporting the opening of three new dental practices



#### Wellington

1st new dental practice in **Somerset for 10 years** 

Targeted communications delivered: 90% of new patients from Somerset, 53% from Wellington

Achieved: Aim of avoiding people from outside Somerset queueing to register

Next: 2 more practices opening in Chard (December) and Crewkerne (2026).



#### **Smokefree Somerset**

Our Smokefree Somerset campaign – in partnership with public health – targets the leading cause of preventable disease. What's Your Why? uses personal case studies and positive messaging to help support people to guit for good.

**Our social** media posts led 14,000 people to 'quit smoking' pages

Our inspiring stories have been seen 158,000 times

813 referred smokers have set a quit date since April 2025

We have the highest quit rate in the region.

Our networks and social listening bring real-time insight on public opinion to the top table to influence how teams respond in times of challenge. Trust in the NHS is at all-time low, meaning effective communication is key to restoring confidence





Stakeholder engagement with practices, town council, patient group, MP and media

Listening to your concerns and sharing practical information

Communications to 6,500 patients moved

to new practice

# **Sharing your views and concerns at times of challenge**

Using online opinion and feedback from stakeholders to work with system partners on communications supporting:

- → Temporary changes at Yeovil Hospital's paediatric and maternity units
- → Reimagining community services
- → Reconfiguring stroke services

# Access to pharmacy and dental services



Managing public and stakeholder concerns around access to NHS dentistry and community pharmacies

#### **Collaboration**

We know you want us to collaborate and join up our services so we bring health and care partners together through **10 groups and newsletters** to ensure consistent messaging and access to the right information when you need it.

# Human-centred digital content that makes complex messages simple.

Short videos, human-centred stories, and clear infographics make information accessible, while localised posts and partner collaborations ensure key messages are delivered in engaging ways that resonate with audiences.

# Top performing post: **Do I need to keep my child off school?**





Surfaced parents' concerns and worries – insight now being used to shape future communications



# Communications, Marketing and Engagement Spotlight

1 September -31 October 2025

Welcome to our spotlight report, highlighting communications and engagement activity in September and October 2025. This edition covers Somerset's Big Conversation, Smokefree Somerset, vaccination campaign success, dental and armed forces campaigns, engagement highlights and our social and news activity.

### **NHS Somerset AGM**

A 'marketplace' event for our local health and care partners to network and showcase their work was among the highlights of our Annual General Meeting on 30 September.

This year, we teamed up with Somerset NHS Foundation Trust to hold our respective AGMs on the same day at the County Ground in Taunton. The marketplace attracted 45 stands, with 111 people supporting these stalls, as well as 104 people registered to attend the AGM.

The theme for this year's event was the NHS 10-Year Health Plan and the stalls showcased a wide variety of services provided by statutory and voluntary, community, faith and social enterprise (VCFSE) partners.

A copy of our slides from the AGM can be found <u>here</u>. The '10 Year Health Plan Somerset Engagement 2025 Summary Report' provided at the AGM can also be found <u>here</u>.

The communications team also produced a <u>short video</u> of the day, featuring vox pops with attendees.

It's so useful talking to people and finding out what happens on the ground Mayor of Taunton











### Social media highlights

NHS Somerset followers: 115,139











6,070 98,915 2,535

483

**Our Somerset Followers: 2,655** 







410

### Top 5 most engaging posts:

#### Is my child too ill for school?



- 361,250 reach
- 67,899 engagements
- 375 reactions
- 496 comments
- 211 shares
- 184 link clicks

#### UTC/MIU could help you with...



- 74,125 reach
- 1,844 engagements
- 53 reactions
- 1 comments
- 26 shares
- 156 link clicks

#### Vaccine eligibility



- 63,768 reach
- 3,602 engagements
- 246 reactions
- 115 comments
- 107 shares
- 4 link clicks

#### Nick's Silent Killer BBC media coverage

No symptoms, but my blood pressure concerned GP



- 40,615 reach
- 1,466 engagements
- 26 reactions
- 1 comments
- 5 shares
- 327 clicks

#### **NHS Somerset website**

- 25,000 active users
- Top pages: Homepage, Prescribing and Meds, Antimicrobial, Covid-19 vaccination FAQs, EBI

#### **Our Somerset website**

- 1,500 active users
- Top pages: Blood Pressure, Homepage, Pain Cafes, My NHS75 Story: Jonathan

#### Jonathan as Chief Executive to Cluster



- 6,513 impressions
- 613 engagements
- 203 reactions
- 31 comments
- 4 shares
- 375 clicks







### In the news



#### **Somerset Health Data Survey**

In October, we teamed up with Healthwatch Somerset to launch a new <u>Somerset Health Data Survey</u>. This is a chance for people to share their views on how the NHS stores and uses health data and to help shape the future of care in our county.

**Read more** 



# Luson Surgery patients successfully moved to Wellington Medical Centre

In October, following the closure of Luson Surgery on 26 September, we reported that the 6,600 patients registered at the practice had been automatically moved to Wellington Medical Centre from 29 September, where more doctors were being recruited.

<u>Read more</u> <u>BBC News</u> <u>Wellington Weekly News</u>



#### **Minehead Medical Centre procurement**

In September, we announced that One Medicare, which had turned around general practice services in Minehead over the previous 18 months, will continue to run the practice after a successful procurement exercise by NHS Somerset Integrated Care Board.

Read more West Somerset Free Press



#### NHS dentist opens its doors in Wellington

In October, a new dental practice offering NHS dental care officially opened in Wellington, marking the first such opening in Somerset in ten years. The Wellington site offers both NHS and private appointments, with the location chosen due to high local demand for NHS dental care.

Read more BBC News ITV News
Somerset County Gazette









### In the news



#### **New Integrated Care Board appointments**

In September, we announced the appointments of the Chair and Chief Executive for the new Integrated Care Board cluster. Rob Whiteman, currently Chair of NHS Dorset is the new cluster Chair, and Jonathan Higman, NHS Somerset's Chief Executive, is the new cluster Chief Executive.

Read more <u>here</u> and <u>here</u>



#### **Maternity services at Yeovil Hospital**

In September, NHS Somerset welcomed the commitment of Somerset NHS Foundation Trust to fully reopen the inpatient maternity and special care baby unit at Yeovil Hospital. A further update from the Trust is expected in November.

Read more BBC News ITV News Somerset County Gazette



#### **Know Your Numbers Week**

In September, to mark Know Your Numbers Week, we partnered with Public Health to share real-life stories to encourage people in Somerset to know their blood pressure, and potentially save their lives.

Read more Somerset County Gazette
Around Wellington



#### Winter vaccination plans

In September, we launched our winter vaccination plans as children returned to school. This forms part of our 'Live Well This Winter' campaign which is about empowering people to take simple but effective steps to protect their health and that of their loved ones during the colder months.

Read more BBC News Somerset Live









### **Campaign highlights**

# From sickness to prevention – excellent start for seasonal flu vaccination campaign

A key system priority is to increase uptake of vaccinations this year and our seasonal campaign to support this vital work is proving highly successful.

In September, we launched the seasonal flu vaccine campaign with coverage around vaccines for those who are pregnant, filming at one of the clinics in Bridgwater to understand why parents-to-be had prioritised their vaccinations this year, which included short videos shared across our social media channels as well as media coverage.

A highlight of our outreach has been the heart-warming video featuring Lina, from our 2-3-year-old cohort, getting her nasal flu vaccine. You can view it here:

https://www.youtube.com/watch?v=TOBVqpJd3sg

The goal was to help demystify vaccination and make the process feel accessible to families. The video has been shared across the region and has reached 47,750 people via Facebook.

Our social media activity has also tackled a recurring barrier: confusion around eligibility for the free vaccines. We've posted clear eligibility checklists and booking links. This helps minimise frustration among those who try to book and are told they don't meet the criteria. A simple infographic has been the post with the most reach (64,760).

Vaccine communications will continue to be a focus until the end of 2025, targeting those communities where uptake is low so that those eligible know how quick and easy it is to get protected this winter.













### **Campaign highlights**

# Widespread coverage for the Orchard Project as part of support for Somerset Armed Forces

Almost 10% of Somerset's population is directly connected to the military.

We support our Armed Forces Community Team to promote local projects to support the health of our armed forces community.

The Orchard Project at Dunster Castle; a collaboration between NHS Somerset Armed Forces, ARC and the National Trust, has 'grown' from strength to strength.

The creation of a new community garden and orchard is supported by military veterans and volunteers and will provide a community space that is free and accessible for all to enjoy.

<u>The story</u> has been closely followed in the media including a recent highlight of the week from BBC. It has also featured by <u>BBC News</u>, Greatest Hits Radio, <u>Somerset County Gazette</u> and <u>The Leveller</u>.



# **Newsletter update**

The September edition of Our Somerset newsletter was jointly introduced by Caroline Upton, Vaccination Service Lead for Somerset, and Dr Rob Weaver, GP, and Deputy Chief Medical Officer, NHS Somerset, who talked about the importance of vaccinations to help keep people stay healthy over the winter.

We also reflected on real stories shared to mark 'Know Your Numbers!' Week, how ProActive Somerset is making a difference through physical activity on referral, signposted to a women's health and wellbeing event in Glastonbury in November, and learned how patients in Bridgwater are now able to self-refer for a chest X-ray to help detect lung cancer earlier.

You can find all editions of the newsletter on our websites:



our SOMERSET





### Winter communications plan

# Plan encourages vaccination uptake and 'choose well' messaging

In winter, increased demand and higher levels of staff sickness can result in patients waiting longer than they should to access care.

We have worked with system partners across Somerset and the wider region to produce our winter communications plan.

The communications actions are focussed around four core objectives:



#### Objective 1: Help achieve system vaccination uptake targets

- Encouraging uptake across staff, partners, and the public helps keep people well, prevents hospital admissions due to COVID, RSV, and flu and reduces staff sickness during peak pressure periods.
- Objective 2: Support local people to 'choose well'
  - Encourage people to use the right service for their needs to reduce pressure on hospitals and GPs.
  - Promote: Community pharmacy, Urgent Treatment Centres, Open Mental Health support, 111 and 111 Online, Health apps (NHS App, HANDi App), NHS Quicker for accessing secondary care
- Objective 3: Promote self-care and support people to stay well
  - Promote local support and self-care initiatives to keep people healthy and reduce hospital demand:
    - pain cafes, community hubs, village agents, falls prevention, healthy eating, exercise and Smokefree Somerset
    - Support for domestic abuse, elder abuse and drug/alcohol misuse
    - Smokefree Somerset: 10% increase in successful four-week guit attempts
    - Take the Pressure Off campaign: encourage 3,000 additional blood pressure checks and lifestyle changes by March 2026
- Objective 4: Support the system during periods of escalation
  - Manage winter pressure communications for A&E, hospitals, GPs, and social care.
  - Work with operational and system communications teams to coordinate responses during major incidents, severe weather or system pressures.

Working with system partners we will identify a number of 'big moments' where we will develop mini campaigns, alongside our ongoing vaccination and Choose Well promotions.









# **Campaign highlights**

#### **New NHS dental practice opens in Wellington**

We know improving access to NHS dental care is a high priority for local people and is a key ambition for NHS Somerset.

In October, our primary care team and independent provider Dentistry For You were ready to open the county's first NHS dental practice in ten years – in Wellington.

The town was identified as one of the areas areas of the county where NHS appointments are most needed.

The communications and engagement remit was to ensure local people were aware of the opening and could express an interest in an appointment at the practice. We also aimed to avoid queues of people waiting outside the building, as has been recently seen in Bristol.

In September, patients were able to register their interest in signing up to the practice via a special website, before the practice opened on a phased basis from mid-October. Around 90% of the 4,000 patients registering their details were from the Somerset area, and more than half were from the Wellington area. An official opening is scheduled for early December.

The new practice, called Wellington Dental Care, is part of NHS Somerset's plan to improve access to NHS dental services across the county.





#### NHS dental practices set to open in Chard and Crewkerne

Two more surgeries are planned and communications work is well under way. **Chard Dental** is due to open in December with **Crewkerne** following in 2026.

In Chard, plans are place to reach local households, primary schools GP surgeries and care homes in the area.







### Campaign highlights

#### Smokefree Somerset - 'What's your pledge?' campaign

A new community campaign was launched this Stoptober, as part of our work – in partnership with public health – to target the leading cause of preventable illness.

People in Somerset are being encouraged to come together in support of a smoke-free future. The initiative focuses on open conversations, shared motivation, and practical help to inspire friends, family, and colleagues who are thinking about quitting smoking.

Rather than pressuring anyone to quit, the *What's Your Pledge?* campaign promotes care and understanding – helping people start supportive conversations and offering encouragement when it's needed most. Research shows that positive support from loved ones can significantly increase someone's chances of successfully quitting.

As part of the campaign, the Public Health Team and NHS Somerset are visiting community events across the county to meet local people, share advice, and raise awareness of the free help available. Our pledge campaign has launched, promoting supportive conversations and practical help for quitting smoking.

These events offer a chance to find out more about the campaign, pick up resources, and learn how to support someone on their quit journey.

Free local support is available through Smokefree Somerset, including one-to-one guidance, group sessions, stop-smoking aids, and the NHS app to track progress.

For more information and resources, visit: <u>bit.ly/SmokefreeSomersetSupportPledge</u>













# **Somerset's Big Conversation 2025**

#### Our biggest engagement programme yet!

Ensuring we hear from local people in Somerset is central to NHS Somerset's role as a strategic commissioner so from May to October, the Communications and Engagement team took to the road with Somerset's Big Conversation 2025.

We partnered with colleagues from across NHS Somerset and Our Somerset – the integrated care system – including colleagues from Somerset NHS Foundation Trust and the voluntary, community, faith and social enterprise sector.



#### Over the summer and autumn we:

- Attended 33 locations across the county
- Received 445 survey responses
- Had 340 participants take part in online engagement activities
- Delivered targeted engagement with under-represented groups
- Worked collaboratively with six VCFSE organisations
- Received over 5,000 pieces of feedback from residents

We also engaged people online through our SBC 2025 1,000 responses) and emails from the public.



webpage, survey, digital activities (which attracted nearly











# **Somerset's Big Conversation 2025**

#### Working with VCFSE partners

Working closely with VCFSE partners, we reached people who are more likely to experience health inequalities – ensuring a wide range of voices were heard.

In October, we focused on targeted engagement with groups and communities who often find it harder to have their voices heard. Through a small-grants scheme, trusted VCFSE leaders engaged their own communities, helping people share their views in familiar, supportive environments.



#### Using AI to strengthen public insight

We've developed a rigorous AI Verification Framework to guide how NHS Somerset uses artificial intelligence responsibly when analysing engagement feedback. The framework keeps transparency, ethics and human judgement at its core – using technology to enhance, not replace, how we listen and learn from our communities.

Our next step is to publish a detailed findings report, highlighting key themes, insights and priorities that will shape Somerset's future health and care strategy, showing how your feedback has made a difference through our ongoing commitment to "You Said, We Did."







Visit: Somerset's Big Conversation 2025 - NHS Somerset ICB







## **Engagement highlights**

#### **Somerset Linked Data Platform**

Essential to our role as a strategic commissioner is having access to timely and accurate data about the needs of our local population. This enables us to make the right decisions about what services are needed and where to provide them.

Partners across Our Somerset, the county's integrated care system, are currently working on a vital project to create the Somerset Linked Data Platform (SLDP). This is a secure system that will anonymously link health and social care data to support population health management work.

By building a complete view of communities' health and wellbeing needs, the SLDP will help prevent illness, tailor care, and predict future health requirements.

A public survey was launched in October in collaboration with Healthwatch Somerset to gather further insight into public awareness of the SLDP, any worries people may have, and any barriers that might influence a decision to opt out.

To support this work, we have held a series of engagement events across Somerset to raise awareness of the platform and understand any concerns residents may have about how their data is used.

Feedback from these activities will help ensure the platform is transparent, trusted, and developed in line with the needs and expectations of Somerset residents.

#### HAVE YOUR SAY

We would like as many people as possible to get involved and share their views on this important project. To share your views, visit <a href="https://www.nhssomerset.nhs.uk/news/somerset-health-data-survey/">www.nhssomerset.nhs.uk/news/somerset-health-data-survey/</a>

Take a look at these sample questions:

- 1. How comfortable are you with the NHS linking its patient data, in a way that means individuals cannot be identified, with information from other public services (e.g. councils, charities, fire service) to improve healthcare and public services?
- 2. Do you think the example below is an appropriate use of patient data? To improve mental health support for people, the NHS cross-checks GP prescriptions with mental health service records. Patients who have been prescribed antidepressants or anti-anxiety medication but have not yet accessed mental health support are contacted to inform them about available services and how to selfrefer. Data is used in a way that means individuals cannot be identified when establishing those most as risk, with re-identification only occurring when outreach to the patient is required.

The closing date is 31 December 2025.









#### **Somerset's Big Conversation 2025**

#### **Initial Findings Report – November 2025**

#### Introduction

Somerset's Big Conversation 2025 a large-scale engagement roadshow running from May-October, led by the NHS Somerset Engagement Team, to listen to people across the county about their experiences of health and care, and their ideas for the future. The roadshow visited a wide range of festivals, markets, supermarkets, community venues and local events.

Somerset's Big Conversation led by NHS Somerset and delivered with support from wider system partners, including Somerset NHS Foundation Trust, Somerset Council, Public Health, Healthwatch Somerset, and Voluntary, Community, Faith and Social Enterprise (VCFSE) partners. Colleagues from a wide range of teams worked together to ensure consistent engagement and messaging and shared learning across the system. This collaborative approach demonstrated the strength of partnership working across the ICS, including uniting services and voices around a shared desire for a future vision for community health and wellbeing.

The purpose of the roadshow was to:

- a) Raise awareness of the NHS in Somerset and key work, projects and initiatives
- b) Deliver key healthcare campaigns in areas such as high blood pressure (hypertension), quitting smoking and research
- c) Engage with residents across Somerset on their experience of NHS services, but with a particular focus on community services. The programme aimed to discuss peoples experiences, seek their views on what is working well and what a model for future local and community healthcare service provision could look like

The engagement roadshow built on the strong foundations of our first roadshow last year, Somerset's Big Conversation 2024, the 10-Year Health Plan engagement earlier this year and our continuous engagement with communities across the county. Insights from these earlier conversations, particularly around the three key shifts of moving from hospital to community, analogue to digital, and sickness to prevention, helped shape this year's focus and questions. By combining lessons from last year's roadshow with ongoing feedback from residents, partners and voluntary organisations, the 2025 programme was able to explore in greater depth how community services can evolve to better meet the needs of Somerset's people and places.

The engagement was undertaken to inform Somerset's strategic planning in response to the 10 Year Health Plan and our emerging Community/Neighbourhood Services Strategy, focusing on the wider shift towards delivering care closer to home. Once findings have been analysed and a full findings report completed, this will be made available to the public, to all participants and will be shared with relevant Boards, individuals and teams to inform and enhance their strategic planning.

The feedback we have heard from Somerset residents will guide decisions about the future role of community hospitals and neighbourhood health centres, helping to ensure that services are designed around what people have told us matters most, for example accessibility, prevention, continuity, and local connection. This feedback will also support wider system planning across the





ICS, ensuring that investment and innovation are targeted where they can make the biggest difference to residents' everyday health and wellbeing. Ultimately, these findings will help create a more joined-up, person-centred approach to care across Somerset's communities.

In time, we will be able to share clear "You Said, We Did" updates to show how public feedback from Somerset's Big Conversation 2025 has directly influenced our plans and decisions for the future of local health and care.

#### **Engagement Activity Overview**

From May to October 2025, Somerset's Big Conversation travelled across the county to hear directly from local people about their experiences of health and care – and their ideas for the future. The roadshow combined face-to-face events, online tools and community-led sessions.

#### <u>In-person engagement.</u>

Thousands of residents took part in our online and in-person engagement opportunities, through attending events, emailing us, competing our survey and using online interactive engagement tools such as *Pauline's Story* and the *Somerset Pound* budget challenge. Targeted outreach and a small grants scheme enabled community and voluntary groups to reach seldom-heard voices, ensuring feedback represented the full diversity of Somerset's people and places.

The following information and statistics are provisional and will be updated when all engagement feedback has been analysed.

#### **Digital engagement**

- An online website with all useful information regarding engagement opportunities https://nhssomerset.nhs.uk/big-conversation-2025/
- Social media posts encouraging comments and feedback to be shared all recorded and considered as public feedback
- An online survey enabled residents to share experiences and ideas from home 445
  people shared their feedback through our online survey
- Approximately 340 people used our online 'Pauline' and 'Budget' engagement activities two interactive tools encouraged deeper participation:
  - Pauline's Story a scenario exploring how and where people prefer to receive care
    in the community.
  - The Somerset Pound a budget challenge inviting people to prioritise local health spending

#### In person engagement

- Over 33 public events held across the whole county, including festivals, markets, supermarkets, libraries, Talking Cafés and community fairs.
- Key locations included those with hospitals and community hospitals, to discuss local healthcare services, for example in Yeovil, Taunton, Bridgwater, Shepton Mallet, Frome, Glastonbury, Minehead, Chard, Crewkerne, Wincanton, Wellington, South Petherton, Dulverton, Williton and Burnham-on-Sea.





- Attendance at large, public community gatherings with high footfall such as Home Farm Fest, Armed Forces Day, Taunton Flower Show, Mid Somerset Show, and local food and wellbeing festivals.
- Smaller outreach sessions were delivered in rural and coastal areas through Talking Cafés, community centres and local groups

#### Targeted engagement with those more likely to experience health inequalities

- Six VCFSE groups received small grant scheme funding to engage on our behalf
- Engagement through our social media posts and feedback shared online through our organisation's social media pages, for example Facebook and NextDoor

#### Community-led engagement

- A VCFSE Small Grants Scheme supported local groups to run their own engagement sessions, with resources provided by the Engagement Team
- This ensured that voices from seldom-heard communities including carers, young people, people with disabilities and those living in rural or isolated areas – were represented through email contact with networks and workshop presentations

#### Overall reach and impact

- More than 5,000 individual pieces of feedback were gathered across all channels the final number will be shared once the findings analysis stage has been completed
- More than 1,300 face-to-face conversations and 445 online survey responses.

The insights collected provide a rich, inclusive evidence base to inform Somerset's future Community Services strategy and help shape how health and care are delivered closer to home. This feedback will also inform decisions about how best to use community hospitals and local facilities, strengthen prevention and early support, and improve coordination between health, care and voluntary services. Together, these insights will help build a more accessible, equitable and community-focused health and care system for Somerset.

#### **Using AI to Support Feedback Analysis**

As the engagement roadshow took place across six months and involve a range of different engagement activities, Somerset's Big Conversation 2025 generated a significant amount of public feedback, reflecting the scale and reach of the engagement. The feedback gathered is rich in detail and includes both qualitative and quantitative data than requires expert analysis.

All feedback is currently being analysed and prepared, so that it can be combined into a single, anonymised dataset for Al-assisted and human thematic analysis – ensuring every contribution is reviewed, coded and represented fairly in the final findings.

To help manage and analyse the thousands of comments gathered through Somerset's Big Conversation 2025, NHS Somerset has introduced the use of Artificial Intelligence (AI) as part of its insight and reporting process. The volume and richness of feedback received, spanning opentext survey responses, digital activities, and free-form comments from community events, make AI a valuable tool to identify recurring themes, emerging priorities and patterns in public sentiment far





more efficiently than manual methods alone. By conducting Al analysis within the team, we are better able to understand the process and therefore have more control, to ensure it is rigorous, complies with any guidance and policies and meets data privacy standards.

In recognising that AI is only as good as the people guiding it, all AI-supported work is carried out under a new and robust 'AI Verification Framework' developed by Kat Tottle, Engagement Lead. This has been a piece of work developed through experience of the use of AI in prior engagement, in-depth research, membership of an NHS-wide AI Ambassador Network, liaison with our Information Governance Team and contact with external, expert colleagues.

The framework ensures that every step of the process – from data cleaning to analysis – meets the highest standards of accuracy, ethics, transparency and human oversight. It sets out clear roles and responsibilities, defines how data is anonymised and verified, and includes multiple checks to ensure outputs are fair, representative and free from bias. Every Al-generated theme or summary is reviewed, validated and refined by experienced human analysts within the NHS Somerset Engagement Team.

It is important to highlight that AI has been used to support, rather than replace, human judgement throughout the process. It helps to group similar pieces of feedback, highlight emerging issues, and cross-check consistency across large datasets. This allows analysts to focus more time on interpreting meaning, understanding local context and ensuring that each voice is represented accurately.

The same combination of AI technology and skilled human interpretation will be used to support the drafting of the final findings report. AI tools help identify and evidence key insights across thousands of contributions, while human reviewers ensure that the findings remain grounded in real experiences, retain the tone of people's voices and emotion behind it, and reflect the diversity of perspectives shared across Somerset. This partnership between human expertise and responsible AI use is enabling NHS Somerset to deliver a more rigorous, transparent and timely analysis of public feedback – ensuring that community voices genuinely shape the future of health and care

#### All feedback – early insights (provisional pending completion of full findings analysis)

Initial analysis of the thousands of comments received through Somerset's Big Conversation 2025 suggests several key themes are emerging. These early insights remain provisional and will be refined through the full Al-assisted and human-verified analysis process. However, they provide an initial picture of what matters most to Somerset residents when thinking about the future of health and care.

Emerging themes identified so far include:

- Access to services: Persistent concerns about the difficulty of getting GP appointments, the need for improved access to dentistry, and long waiting times for some specialist or community services.
- Local and community-based care: Strong support for using community hospitals, health
  centres and other local facilities to provide care closer to home, reducing travel and
  pressure on acute hospitals.





- Joined-up working: A desire for better coordination between health, social care, and voluntary sector services, ensuring people don't have to repeat their stories and that care feels seamless.
- Prevention and wellbeing: Clear support for more focus on staying well, with calls for more help around physical activity, diet, mental health, and early intervention.
- Mental health and loneliness: Recurring feedback around access to mental health support, the impact of social isolation, and the importance of community spaces that help people stay connected.
- **Digital inclusion:** Many welcomed digital tools that improve convenience and access, but others raised concerns about digital exclusion, especially among older adults and those in rural areas.
- Communication and trust: Requests for clearer information about services, greater transparency in decision-making, and reassurance that changes are fair and communityled.

All of the feedback heard as part of the roadshow will be subject to further verification and review to ensure accuracy and fairness before inclusion of final summaries, themes, lived experiences and suggested next steps, in the final findings report.

### Community services - early insights (provisional pending completion of full findings analysis)

Early findings from Somerset's Big Conversation 2025 show a strong and consistent message from residents: people value local, accessible, and community-based services that allow them to receive care closer to home. This theme appeared across nearly every event, survey and online activity, highlighting a shared ambition for a more connected and preventative health and care system. While full analysis is still underway, the following provisional insights provide an overview of the emerging views around community services.

Key themes emerging so far include:

- Care closer to home: Many residents expressed a desire for more healthcare services to be delivered locally – reducing the need to travel to larger towns or acute hospitals for routine appointments, tests or follow-up care.
- Role of community hospitals: There was strong support for maintaining and expanding the use of Somerset's community hospitals as multi-purpose hubs offering diagnostics, minor injuries, outpatient clinics, rehabilitation, and wellbeing services.
- Local access to urgent and same-day care: People frequently mentioned the need for more accessible same-day or walk-in options, particularly in rural and coastal communities where public transport is limited.
- **Preventative and wellbeing services:** Many called for increased investment in prevention, including exercise classes, healthy lifestyle advice, social prescribing, and support for mental health and loneliness within local neighbourhoods.
- Community facilities as health spaces: Several communities suggested using existing venues such as libraries, leisure centres, or community halls to host regular health and wellbeing activities, helping bring services into familiar local spaces.





 Equity of access: People in rural areas and small villages were particularly vocal about ensuring fair access to services, stressing that geography should not determine the quality or timeliness of care.

Overall, the early feedback indicates that Somerset residents want a stronger network of community-based health and care services, designed around local needs and supported by well-connected professionals. These early insights will be verified and expanded through the full thematic analysis process to ensure all voices are accurately represented before inclusion in the final report.

#### **Next steps**

The next stage of Somerset's Big Conversation 2025 focuses on completion of the full, comprehensive analysis and verification of all the feedback gathered across the county. As highlighted above, this rigorous process, governed by the NHS Somerset Engagement Team's Al Verification Framework, will ensure that all findings are accurate, transparent and representative of the diverse voices that took part. Once the findings analysis is complete, the Engagement and Insight Team will produce a final findings report summarising the key themes, insights and priorities identified through the roadshow. This report will be shared widely with partners across the Somerset ICS, including NHS Somerset, Somerset NHS Foundation Trust, Somerset Council, Healthwatch Somerset and VCFSE partners, to support joint conversations, planning and decision-making.

The findings will directly inform the development of Somerset's Community Services strategy helping to shape a model around how care is delivered closer to home. Insights will also feed into future engagement and communications activity, ensuring that residents are kept informed about how their feedback has made a difference, through a clear commitment to a "You Said, We Did" approach.

In parallel, NHS Somerset will continue its continuous engagement with communities and stakeholders, maintaining an open dialogue as plans evolve. This ongoing commitment will ensure that the public's voice remains central to the design and delivery of health and care across Somerset — not just through this project, but as a core principle of how the Somerset ICS system works.

For further information on Somerset's Big Conversation 2025 or this report, please email: Kat Tottle, NHS Somerset Engagement & Insight Lead Officer – <u>Katharine.Tottle@nhs.net</u>

NHS Somerset – Statement on the use of AI technology in the production of this report - This report was compiled with the support of AI technology to assist in analysing and summarising large volumes of public feedback. The use of AI followed NHS Somerset Engagement Team's 'AI Verification Framework', which ensures accuracy, transparency, ethical use and skilled human oversight at every stage. AI was used only to support data organisation and thematic analysis — it did not make decisions or replace human interpretation. All data analysed was fully anonymised in line with NHS data protection standards. All outputs have been reviewed, checked and approved by the NHS Somerset Engagement and Insight Team to confirm their accuracy, clarity and alignment with local context and priorities. NHS Somerset retains full responsibility for the content and conclusions of this report. If you identify any errors or omissions, please be assured these were not intentional. We welcome you contacting us so we can make any necessary corrections. Please email: somicb.engagement@nhs.net



# Reconfiguration of stroke services in Somerset Stakeholder update #3 – November 2025

This stakeholder update is jointly produced by NHS Somerset Integrated Care Board, Somerset NHS Foundation Trust (Somerset FT) and Dorset County Hospital (DCH) NHS Foundation Trust to support the implementation phase of work to reconfigure and improve stroke services in Somerset.

#### 1. Background

Following a full statutory public consultation in early 2023, NHS Somerset made a formal decision in January 2024 to provide hyper acute stroke units (HASUs) at Musgrove Park Hospital in Taunton, Dorset County Hospital in Dorchester, an acute stroke unit (ASU) at both Musgrove Park and Yeovil District hospitals and a TIA (Transient Ischemic Attack) service seven days a week at MPH and five days a week a YDH. The decision was taken after full consideration of the Decision-Making Business Case (DMBC).

The project is now in its implementation phase.

#### 2. Updates from Somerset NHS Foundation Trust

#### Clinical pathways

Work continues to ensure that clinical pathways deliver seamless care for patients, regardless of where they live. Stroke clinicians from all three hospitals (Yeovil District Hospital, Musgrove Park Hospital and Dorset County Hospital) are working together with colleagues from other departments such as imaging and emergency departments to work on the detail of how patients will receive care. This work also includes partners such as South Western Ambulance Service NHS Foundation Trust (SWAST), community services and neighbouring trusts.

#### **Building work**

Work to refurbish the stroke unit at Musgrove Park Hospital is planned to begin in the near future.

A start date for building work on the ASU at Yeovil District Hospital is not yet confirmed. This is due to the complexity of new regulations that were introduced as part of the Building Safety Act following the Grenfell tragedy. These new regulations mean that any work in tower blocks has to be approved by the Building Safety Regulator before building work can be carried out. Due to the complexity of the new requirements, it is taking is longer than expected to submit our plans to the Building Safety Regulator. Work will start as soon as approval is received from the regulator.



#### 3. Updates from Dorset County Hospital NHS Foundation Trust

Building works to expand Dorset County Hospital's (DCH) Stroke Unit and create additional Hyper Acute Stroke Unit (HASU) capacity are progressing well.

Contractors Westmade Ltd have removed the existing internal walls and the floor levelling and new partition wall installation works are now underway. The contractor is due to hand over the space on 27 March 2026.

While the refurbishment taking place, the existing Stroke Unit team has relocated to our Mary Anning Unit.

To support the increasing number of patients that we anticipate will attend DCH, the Trust will also be recruiting additional staff and this will include medical, nursing, allied health professional, radiology and stroke pathway roles.

The team at DCH are continuing to work closely with colleagues in Somerset to make sure pathways are seamless for patients, regardless of where they live. The plans to extend stroke services will ensure the national standards of care continue to be met.

#### 4. Call-in request update

As covered in previous editions of this stakeholder update, several requests were made to the Secretary of State to review the decision taken in March 2024 to implement the new model of hyper acute stoke services for the population of Somerset. However, the Secretary of State made the decision that the call-in requests did not meet the criteria for ministerial intervention and took the view that NHS Somerset is best placed to determine the needs of our local population.

More recently, in September 2025, Minister of State for Health Karin Smyth turned down a further call-in request from Yeovil MP Adam Dance saying The Secretary of State for Health and Social Care 'remains content for any decisions relating to the proposal to be taken by the ICB as the local commissioning body for hospital-based stroke services in Somerset'.

NHS Somerset and Somerset FT are continuing to engage with Mr Dance to discuss his concerns.

#### 5. Stroke Stakeholder Reference Group updates

Since the start of the implementation phase the Stroke Stakeholder Reference Group (SSRG) has been led, co-ordinated and supported by an effective and close working relationship between the Transformation Management Office, the NHS Somerset Engagement Team and an independent chair from Healthwatch Somerset. However, due to recent changes at Healthwatch, the role of chair has been taken on by Jo Garbett of the Stroke Association, who continues to be supported by NHS Somerset colleagues, as above. This forum provides a two-way flow of information with the JCSB and is one way in which the voice of service users and local people is heard by project leaders.



The SSRG met in October and discussed the following:

- The Stroke Stakeholder Reference Group (SSRG) has undergone key leadership changes, with Jo Garbett appointed as the new Chair following Gill Keniston-Goble, and Caroline Greaves assuming the ICB liaison role as Julie Jones departs. Kat Tottle will continue to provide engagement team support.
- Current workstreams remain active across several areas:
- Ambulance and Transfer Workstream: South Western Ambulance Service NHS Foundation Trust presented data on ambulance handover processes and 'hear-and-treat' pathways; further data on Somerset response-time outliers will be shared.
- Training and Clinical Equity Workstream: Cross-county collaboration continues to align nurse and medical stroke-care training; confirmation of carer inclusion in the package is expected at the next meeting.
- Patient and Carer Information Workstream: Work is underway to produce stroke-survivor information videos and use iPads (funded by the League of Friends) to support patient communication during transfers.
- Transport and Access Workstream: The Red Cross has withdrawn from the proposed transport pilot; alternative operators and options will be explored at the November meeting.
- Site Visits and Transparency: Members supported arranging both pre- and post-refurbishment visits to stroke units at Somerset FT and DCH. A virtual video tour is being developed to address infection control and confidentiality concerns.
- Implementation Oversight: The group will continue to monitor progress towards the April 2026 implementation date, providing feedback to the Joint System Board on communication, engagement, and patient experience.
- Future Meetings: The next meeting is scheduled for 10 November 2025, with planned agenda items including transport solutions, site visit arrangements, and updates on implementation progress ahead of the April 2026 go-live.

#### 6. Previous stakeholder updates

Previous stakeholder updates on the reconfiguration of stroke services in Somerset can be read here.

**ENDS**