

Annual General Meeting 2024/25

30 September 2025



We are NHS Somerset

Driving collaboration, supporting innovation, promoting good health



Paul von der Heyde

Deputy Chair, NHS Somerset

Welcome, introduction and approval of minutes

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Jonathan Higman Chief Executive, NHS Somerset



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Ten Year Health Plan

The 10-Year Health Plan sets out a long -term vision to create a health service that is more preventative, digitally enabled, and rooted in communities.

Central to this strategy are three key shifts:

1. Hospital to community
2. Analogue to digital
3. Sickness to prevention

These changes aim to make the NHS fit for the future

CHANGE
NHS



How Somerset shaped the 10 year plan

Between October 2024 and March 2025, NHS Somerset gathered feedback from local people across the county making sure that our voices were well represented in the national survey.

This was done through a mix of in-person events, online surveys and targeted outreach. We talked to NHS staff, voluntary, community, faith, and social enterprise (VCFSE) sector through dedicated workshops and online platforms.

We listened to seldom-heard groups, including rural communities, veterans, young people, through farmers' networks, youth parliament sessions, and veterans' breakfasts.



Somerset's Big Conversation 2025

Alongside feedback on the Ten Year Health plan, we have launched Somerset's Big Conversation (SBC) 2025 to hear from local people about what they think about local health services.

The feedback will help shape the services we provide across the county over the coming years.

Our engagement has been done through a mix of online surveys, interactive digital tools, in-person roadshows, and targeted outreach.

- Online survey - 370 responses
- 23 events
- In-person conversations - 1,204
- Written feedback from events - 1,240

Over 2,500
voices
captured so far



Somerset's
BIG
Conversation



Explore the options

Somerset's
BIG
Conversation

NHS
Somerset

Pauline's
retired, loves
gardening...
and just broke
her leg.



The next step in her care? That's up to you.

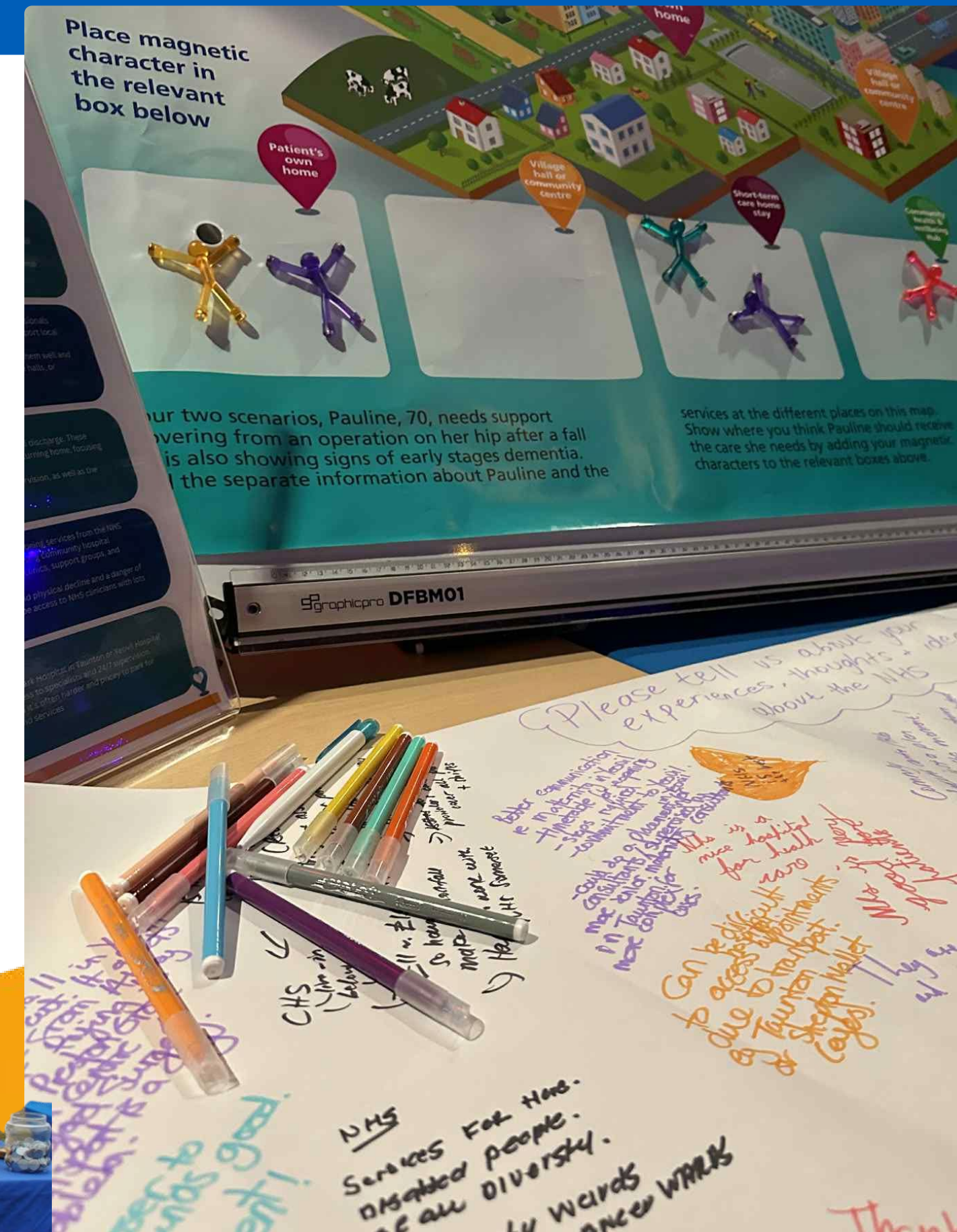


NHS
Somerset

What we have heard so far

The feedback so far has revealed strong public concern around:

- Access to GP appointments
- Long waiting times for treatment
- Availability of NHS dentistry
- Digital inclusion has emerged as an issue
- People were supportive of more care delivered at home, with support in their local communities
- Support for investing in prevention and wellbeing with people keen to see local programmes focused on youth, mental health, and lifestyle support.



NHS Changes - what does this mean?

In order to deliver the Ten Year Health plan the Rt Hon Wes Streeting MP, Secretary of State for Health and Social Care, announced changes to the way the NHS is structured.

ICBs will be re-imagined and focus on their critical role as strategic commissioners, working to improve population health, reduce inequalities and improve access to more consistently high -quality care.

In March it was announced that ICB's would need to cut their running costs by 50%.



Clustering and merging

To deliver the required 50% reduction in running costs, it has been agreed that NHS Somerset will work across a larger footprint with our neighbours in NHS Bath and North East Somerset, Swindon and Wiltshire and NHS Dorset.

The first step was to formally approve our cluster which was confirmed by NHS England and ministers in June 2025.

In September 2025 the new Chairman and Chief Executive for the cluster were announced.

A full merger is likely to take place in 2027.



**Shift
one**

Hospital to community

David McClay, Chief Officer Strategy, Digital and Integration



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Testing new ways of working

In November 2021 Dr Claire Fuller, Chief Executive-designate, Surrey Heartlands Integrated Care System (ICS) and a GP, undertook a stocktake on integrated primary care.

She looked at what is working well, why it's working well and how the implementation of integrated primary care can be accelerated.

In May 2024, NHSE published a letter outlining national support for an initiative involving several ICBs and some of their Primary Care Networks to participate in a pilot to test new ways of working within general practice.

- NHS Somerset is one of seven pilot areas. Helping to inform future ways of working
- The two areas chosen for the pilot were Frome and Mendip



Fuller pilot video:

<https://youtu.be/IAAXAGDv5nU>

Reshaping our approach

We need to transform our services that will guarantee their sustainability for generations to come. We cannot just keep doing more of the same.

It will be important to understand how we can bring services to people as close to home as possible.

We will need to make the most of the valuable skills that we have in our health and care staff as well as within our community.

We want to help people stay well and tackle to wider determinants of ill-health.

We will need to listen to our local people to help us understand how we reshape our community and neighbourhood services, so people can get home faster and recover more quickly.

The people of Somerset support the shift to more care at home.

It is our responsibility to implement this as best we can for our local people and communities

Listening to local people

We want people in Somerset to help us shape how community services are delivered in the future.

People are being asked to take part in surveys, engagement activities and join stakeholder reference groups to make sure that we get things right for our local communities based on their needs.

Things we are asking people to think about include:

- **Outpatient clinics** – for consultations, assessments, treatments or follow up care – run by consultants, nurses or other health care professionals
- **Inpatient care** – where patients receive care that requires them to be admitted to a hospital bed
- **Therapy services** – covering mental and physical health, from talking therapies to physiotherapy and reablement
- **Dementia services**
- **Children's services.**

We have started to consider how to deliver more personalised care within community settings, which have less reliance on bedded care and seek to design future services through local engagement.

Shift
two

Analogue to digital

David McClay, Chief Officer, Strategy, Digital and Integration



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What is a Linked Data Platform?

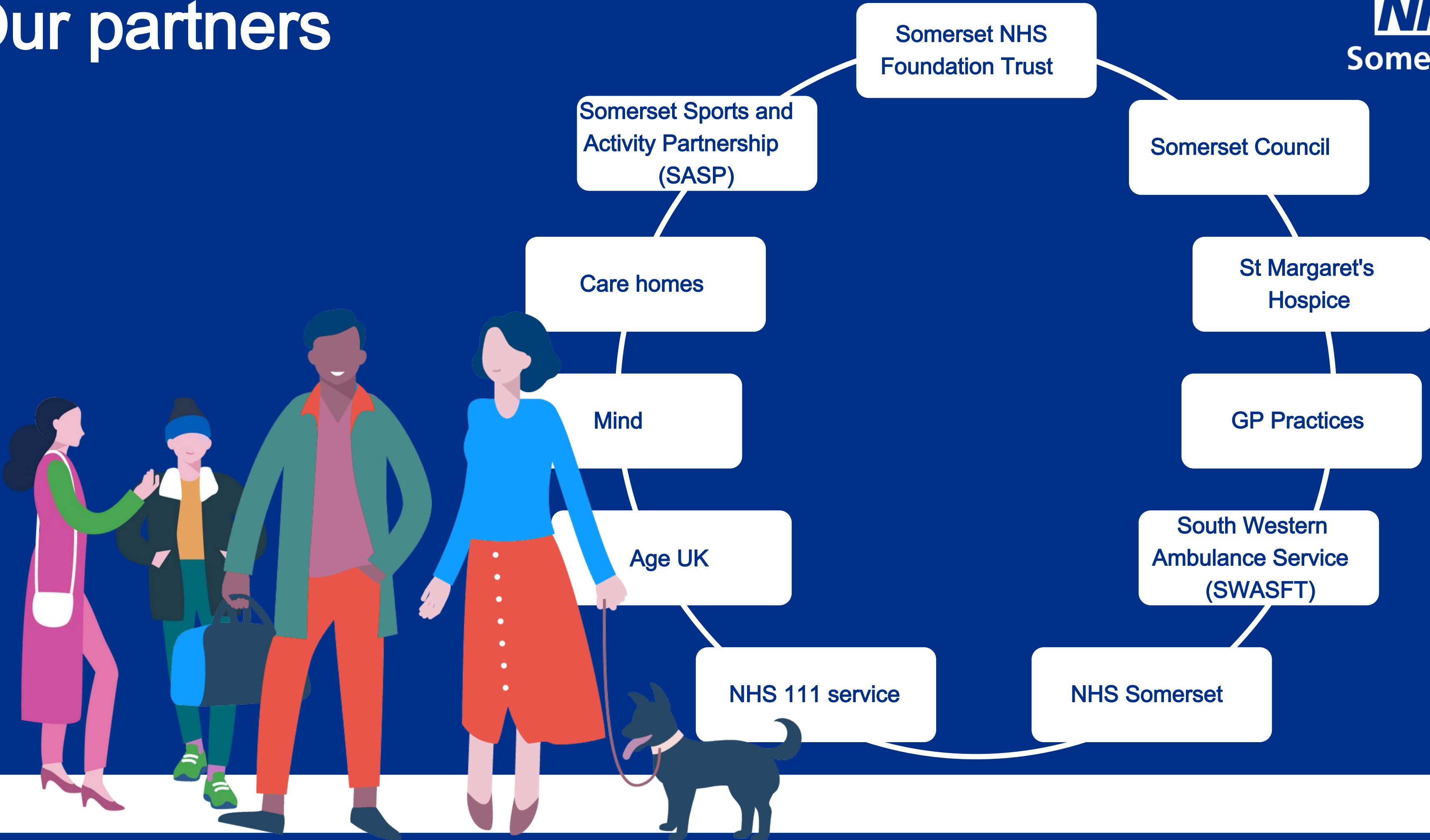
Connect data from healthcare systems and partners in order to provide a comprehensive view of our communities.

Share data anonymously with partners to support research and effective commissioning of health and wellbeing services.

Allow GPs and others to re-identify patients/ residents for health or care interventions when insights indicate specific cases.



Our partners



Single system solutions

SiDeR+ is a shared care record system, which gives an overview of your health and social care information in one digital record.

The **Electronic Somerset Treatment Escalation Plan (eSTEP)** was formally launched across Somerset Foundation Trust (SFT) on 19th May this year.

It captures a person's treatment preferences and the conversations they have had with medical professionals.

When the **eSTEP is in SiDeR+**, it becomes accessible to all health and social care professionals across the county - 24/7 365 days of the year.



So far over 11,500 eSTEPs have been completed in SiDeR+

A new **Dental Electronic Referral System (DERS)** for the South West - enabling referrals for specialist dental assessment and early intervention and prevention.

Replacing current paper-based systems, using technology to improve efficiency.

Creating a more connected and modern healthcare system across different dental providers and ICBs within a region.

**Shift
three**

Sickness to prevention

Bernie Marden, Chief Medical Officer, NHS Somerset



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Why preventing ill health matters

Focusing on prevention can improve the quality and length of life, reduce poor health before it escalates into crisis and reduce pressure on services.

Our health and care strategy sets a clear ambition to work to reduce the time people living in Somerset live in poor health.

Somerset faces some specific challenges :

- Rural isolation
- Coastal inequalities
- A population that is ageing, with many young people moving out of the county.



In Somerset, life expectancy (length of life) is above the national average

Healthy life expectancy (years lived in good health) is not, and on average people live around 17 years in poor health

Around 10% of our population account for approximately 70% of our health and social care resources

Take the Pressure Off

There are an estimated 40,000 people in Somerset with undiagnosed hypertension, putting them at increased risk of conditions such as heart attack and stroke.

In March 2024 we launched our Take the Pressure Off campaign to find people living with high blood pressure but who did not know they were.

Our focus was on men age 40+ who we knew they were less likely to get their blood pressure tested.

We have targeted people through specific workplace testing including, Hinkley Point, Leonardo Helicopters and at local sporting events.



Since 2024 - when NHS Somerset and Somerset Council launched its 'Take the Pressure Off campaign', 11,000 net new cases of hypertension have been found in Somerset.



Radio interview:

<https://youtu.be/2U7UFsG3OvU>

Nick's story...

**"I had no
symptoms
of high blood
pressure at
all and was
completely
oblivious."**



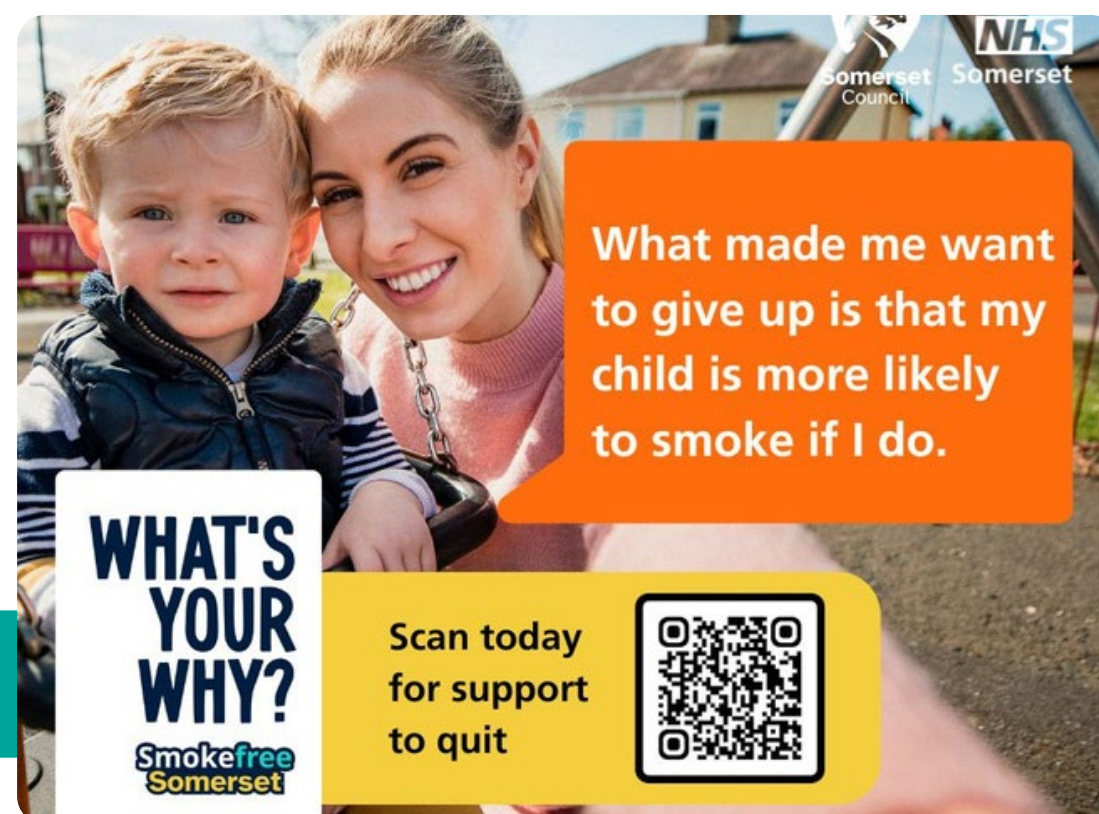
Knowing your numbers
could change your story.

What's Your Why? Helping people to quit

In 2023/24 we supported 1,700 people to set a quit date and 59% of these people quit successfully, but nationally and locally, quit rates have been declining.

On 11 March (No Smoking Day) 2025, NHS Somerset and the Public Health team at Somerset Council launched the What's your Why campaign, encouraging smokers to think about their motivations for quitting.

Our goal is ambitious - to support 45,000 people in Somerset to quit smoking by 2030 and reduce smoking rates in Somerset to below 5% of the population.





Alison Henly

Chief Finance Officer and Director of Performance and Contracting

Our finances and performance

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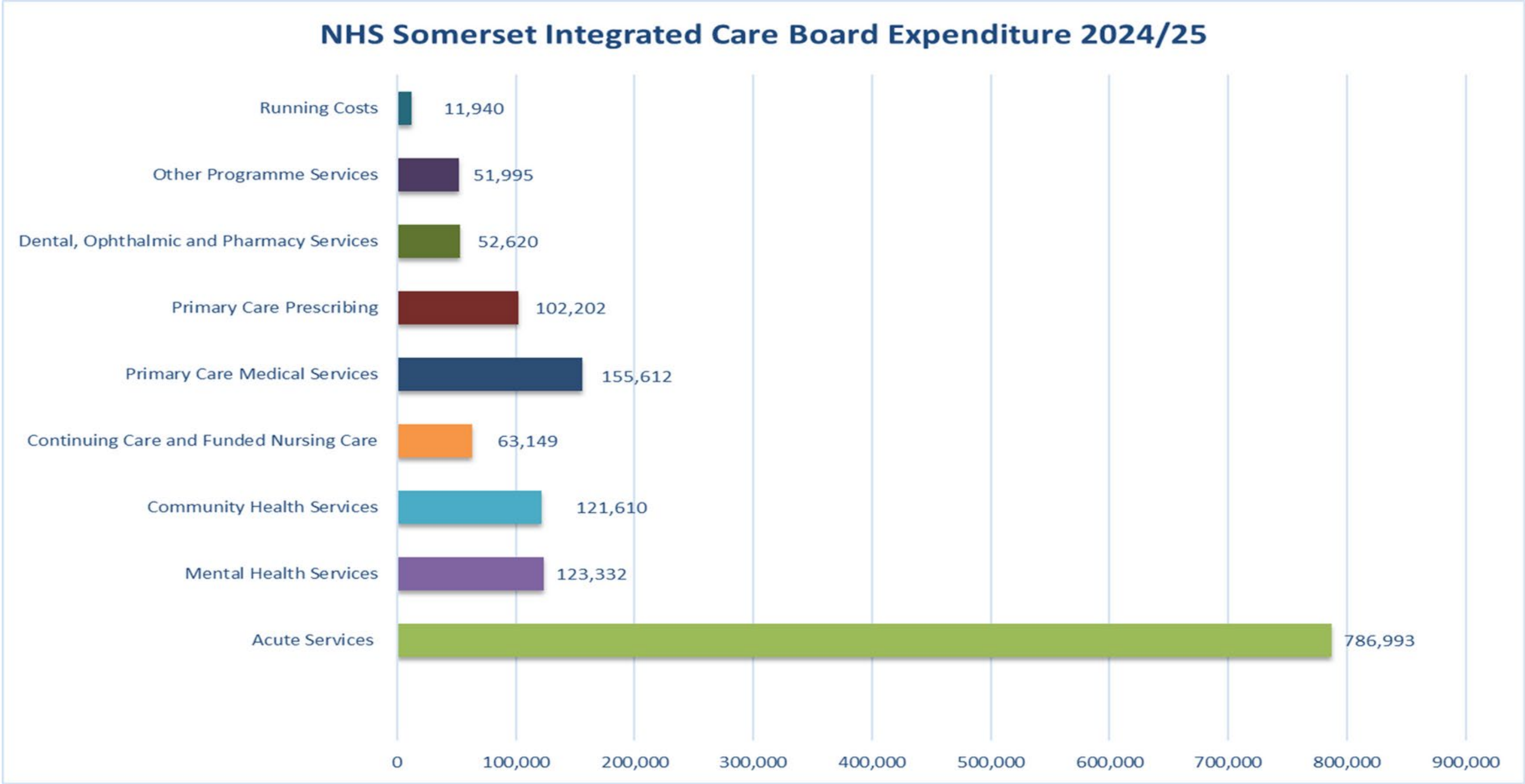
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Our target financial performance

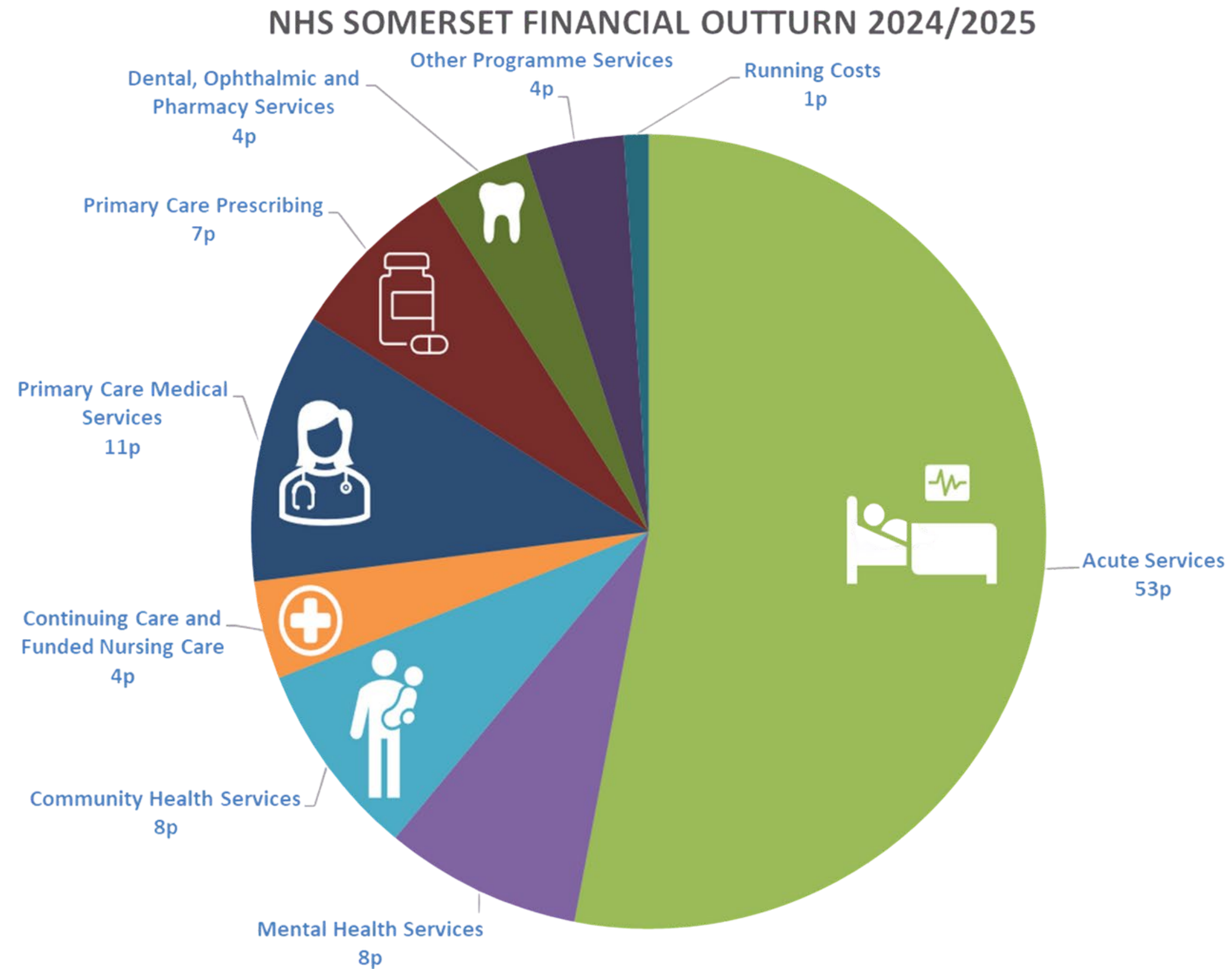
2024/25 Target Performance	Achieved
Expenditure not to exceed income	
Capital resource use does not exceed the amount specified in Directions	
Revenue resource use does not exceed the amount specified in Directions	
Revenue administration recourse use does not exceed the amount specified in Directions	

Our total expenditure



£1,469,453,000 for 2024/25

How we spend our money



Performance 2024/25

Demand for acute care support continued to grow : over 190,000 people contacted our 111 services, approximately 45,000 ambulances conveyed patients to one of our hospitals and 286,000 people visited one of our two emergency departments

NHS 111 Services the average time to answer calls was 1.4 minutes

Average response time for category 1 call : 10.8 minutes

Average response time for category 2 call : 43.7 minutes

Average time waiting in our emergency departments : 74.5% of people were seen within 4 hours

Demand on beds is rising : Demand for hospital beds remained high this year

Hospital beds : In March 2025, 26% of beds in our acute hospitals were occupied with patients who were waiting to be either discharged home or to a more appropriate place to receive the right forward care

Elective activity has increased : 6.6% more people were referred into our hospitals for treatment, but we also increased the volume of delivered activity alongside a 4.7% increase in our overall waiting list size

As of the 31 March 2025:

- 4 patients waiting longer than 78 weeks
- 77 patients waiting longer than 65 weeks
- We have eliminated 104 week waits



Performance 2024/25

Waits for elective activity : 1,253 patients waiting longer than 52 weeks, 77 patients waiting longer than 65 weeks

Cancer referral : 2.7% increase in the number of patients referred by their GP to investigate for suspected cancer

Cancer treatment : 74.6% of patients received a diagnosis within 28 days and 92.2% of patients received their first definitive cancer treatment within 31 days and 64.7% of patients received treatment within 62 days of referral from either a GP, consultant upgrade or from the screening service

Talking therapies: 67% of people had their symptoms significantly improved from the start to the end of treatment which is consistently above the 48% national average

Dementia : 54.8% of patients aged 65 or over who are estimated to have dementia, had a recorded diagnosis of dementia

Community Health Services waiting list : when comparing March 2024 to March 2025, the total waiting list has increased by 6.5% from 9,099 to 9,886





Time for questions

Thank you for coming

Stay in touch, follow us @nhssomerset



nhssomerset.co.uk