



**North East and
North Cumbria**

North East and North Cumbria Integrated Care Board Women's Health Hub Pilots

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Background

- The first National Women's Health Strategy was published in August 2022
- The 10-year strategy sets out a range of commitments to improve the health of women and included the appointment of Professor Dame Lesley Regan as a Women's Health Ambassador for England
- 2024/25 priorities and operational planning guidance set the ambition:
 - NHS England will work with ICBs to ensure that at least 75% have a women's health hub in place by July 2024 that meets minimum requirements, including a virtual option.
 - Establish and develop at least one women's health hub in every ICB by the end of December 2024 in the line with the core specification, improving access, experience, and quality of care.
 - NHS England invested £595,000 in total over 2023/24 and 2024/25, for each ICB.

National Priorities

These priorities will be supported by our existing networks, including the invaluable input from our clinical leaders, which alongside our commissioned WHHs, will focus on the following themes, which mirror the following national priorities:

- Menstrual health and gynaecological conditions.
- Fertility, pregnancy, pregnancy loss and post-natal support.
- Menopause.
- Mental health and wellbeing.
- Cancers.
- Healthy ageing and long-term conditions.
- The health impacts of VAWG.

Progress to-date:

- A needs assessment [led by North East Office for Health Improvement and Disparities] has been developed using existing women's health data profiles, women's voice intelligence taken from a variety of local sources from across our health & social care and VCSE partners and from mapping of current commissioned women's health services to identify gaps with existing provision.
- We have developed our Women's Health Programme to deliver our priorities for Years 1 and 2 through the development of an implementation plan, which will contribute to the longer-term outcomes contained in the national long-term strategy.
- Year 1 [2024/25]:
 - Women's Health Hubs [which will include a comprehensive evaluation].
 - Contraception including LARC [long-acting reversible contraception] and post-natal services.
 - Menopause.
 - Cancer.
- Year 2 [2025/26]:
 - Ageing Well and Long-Term Health Conditions.
 - Violence Against Women & Girls [VAWG]
 - Fertility.
 - Mental Health.

Women's Health Hubs

Through expressions of interest [EoI], NENC ICB commissioned 3 WHH pilots in September 2023.

Please find below core services currently being delivered across WHH as of 31/10/2024:

	WHH	Sunderland WHH	Gateshead WHH	North Cumbria WHH
	Hub type	One stop shop	Hub and spoke	Primarily virtual
Core Services	Menstrual problems assessment and treatment, including but not limited to care for heavy, painful, or irregular menstrual bleeding, and care for conditions such as endometriosis and polycystic ovary syndrome		December 2024	
	Menopause assessment and treatment	Live	December 2024	Live
	Contraceptive counselling and provision of the full range of contraceptive methods including LARC fitting for both contraceptive and gynaecological purposes (for example, LARC for heavy menstrual bleeding and menopause), and LARC removal, and emergency hormonal contraception	Live	Live	Live
	Preconception care			
	Breast pain assessment and care			
	Pessary fitting and removal	November 2024	Live	
	Cervical screening	Live	Live	
	Screening and treatment for STI, and HIV screening	Live		

Both Sunderland and Gateshead are currently on-track to deliver 5 core services by December 2024.

WHH Evaluation

- The evaluation of each hub model will be invaluable in future planning for women's and girls across NENC.
- We are collaborating with Health Innovation North East North Cumbria [HINENC] to engage with WHH leads and key stakeholders and facilitated the 1st of a women's health sprint.
 - The initial sprint focussed on WHH – discussing what's working, what isn't working and what good looks like for women and girls across NENC.
 - The 2nd sprint will be planned for early 2025 and focus on menopause.

Governance & Assurance

- The newly formed Women's Health Group is a sub-group of the NENC ICB Executive Committee with robust governance parameters.
- Each WHH provides progress updates via monthly highlight reports.
- Progress updates to NHS England are reported monthly.

Women's Health Conference

- Following our first Women's Health Conference in October 2023 where we launched our ambition, our second Women's Health Conference in July 2024 focussed on Women's health innovation and opportunities to learn and collectively improve women's health in the North East and North Cumbria. It was attended by around 300 people and enabled sharing best practice around innovative women's health in the region, whilst providing an opportunity for connection and inspiration to tackle the health equity of women's health.
- Feedback from the conference showed a high level of satisfaction and confidence in the event as 77% of participants felt the conference focused on important priorities for driving the women's health agenda forward and 82% said they would recommend the conference to their colleagues.
- Following the success of the conferences held to-date, a third women's health conference is currently being planned for the summer of 2025.

Gateshead Women's Health Hub – a model of care

Nicola Bruce

Director of Strategy and Partnerships

Gateshead Health NHS Foundation Trust
on behalf of Gateshead Cares

29th November 2024



Gateshead Women's Health Hub: a model of care

- Gateshead Place
- Improving access and outcomes for women and girls
- Focus on areas of deprivation
- Multi-agency steering group overseeing the work
- A shared and collective vision
- Non recurrent investment secured to end March '25
- A sustainable model



Definition

- Women's health hubs bring together healthcare professionals and existing services to provide integrated women's health services in the community, centred on meeting women's needs across the life course. Hub models aim to improve access to and experiences of care, improve health outcomes for women, and reduce health inequalities.

Description

- A model of care working across a population footprint and are not necessarily a single physical place.
- Hub models address fragmentation in service delivery with the aim of improving access, experiences and outcomes.

Types of hub models

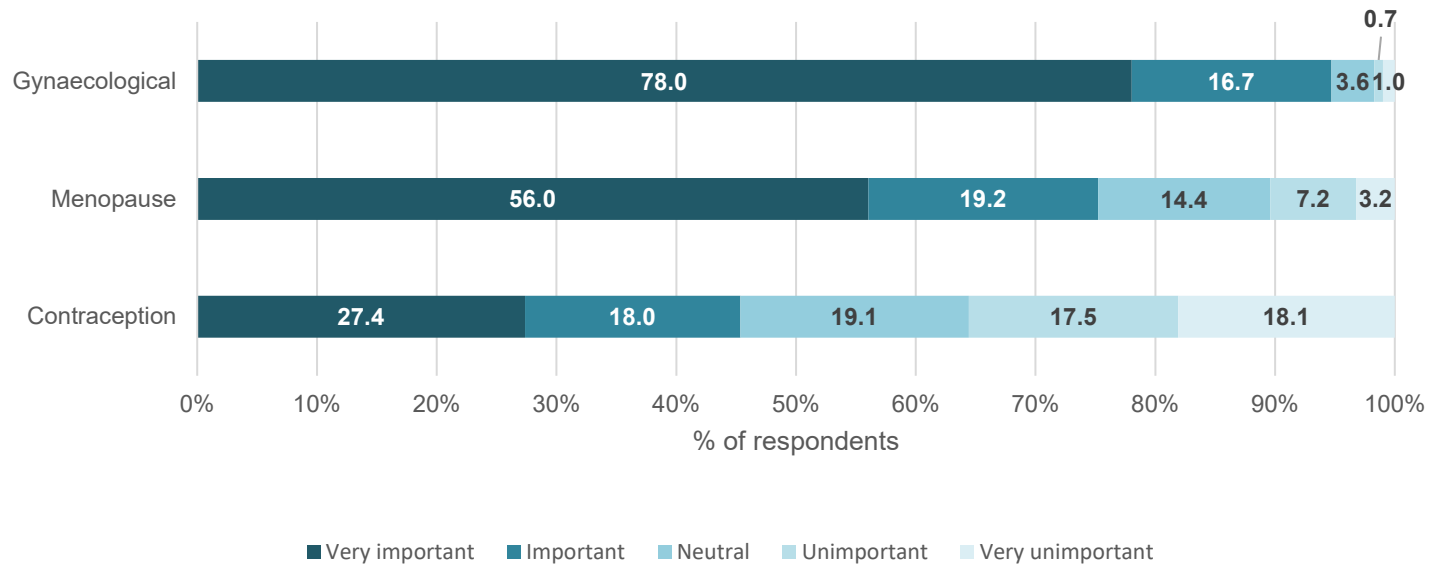
- **Hub and spoke:** this model provides more specialised services such as investigations and diagnostics in a central hub, for example a hospital, which is linked to a network of local 'spokes', for example GP surgeries or community venues. The spokes can either be a physical location or virtual
- **One stop shop:** this model provides a wide range of services at the same venue, or provides multiple services in a single patient visit, which reduces the need for patients to attend numerous appointments
- **Primarily virtual:** this model provides the majority of services virtually, for example patient consultations in online, telephone and/or video format, and virtual engagement and education sessions for women and/or healthcare professionals. The model would also need some in-person service provision to meet the aims of a hub and deliver the core services
- **Travelling clinician:** this model involves a clinician travelling to GP surgeries or alternative community venues to deliver women's health services as opposed to enhanced service delivery by an 'in house' clinician
- **Pop up:** this model provides services in a main venue that is temporary or moves location

Survey of women to inform the scope of the work

- Commissioned Involve North East to support
- Three priority areas - menopause, contraception and gynaecology
 - Were these the right priorities?
 - What were people's experiences of NHS support currently available?
- Online survey open from 5th March – 24th March 2024 (paper/alternate versions were available on request)
- 1001 respondents
- Respondents' demographic profiles are generally consistent to 2021 Census data for women in Gateshead (notably younger women were slightly underrepresented)

Priorities

How important are the following priority areas to you?



Top Three “Other” priority areas

- Breast Screening
- Mental health
- Fertility

Headlines from the survey

Menopause : 195 responses

- Almost half of respondents (48.7%) did not feel informed about menopause before they started experiencing symptoms
- For those who said they had experienced difficulties with support or treatment around menopause, the top answer was “lack of specialist knowledge within GP practice” (42.6%). 30.9% said “dismissal of symptoms”

Sexual health services : 120 responses

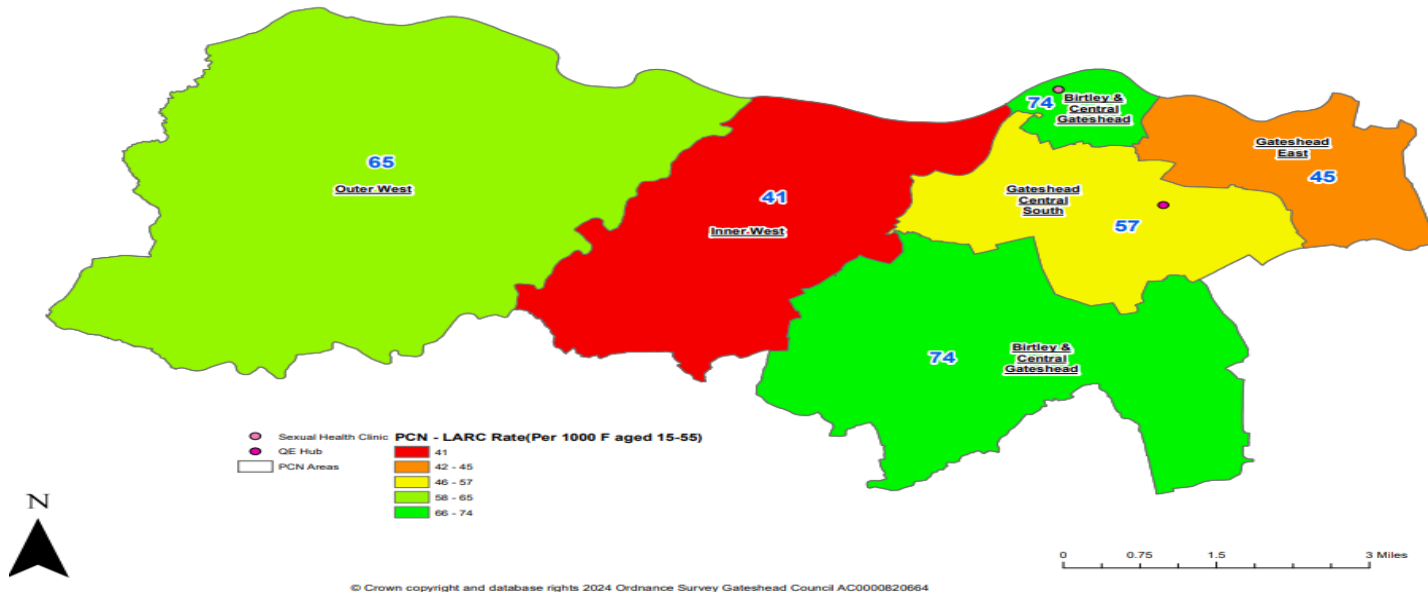
- For the 23.0% who found it difficult/very difficult to access, reasons include “length of wait/other access issues” (60.7%), “service not available at GP practice” (32.1%), “limited appointments” (28.6%), “issues with telephone only appointment system” (21.4%)
- The majority of respondents (59.7%) had never used a Long Acting Reversible Contraception (LARC)

Gynaecology services : 473 responses

- 94.7% of respondents highlighted gynaecology as being very important or important
- Long waiting times (30.1%) and being discharged without a resolution or follow-up appointments (21.7%) were the other main issues respondents identified regarding NHS support or treatment.

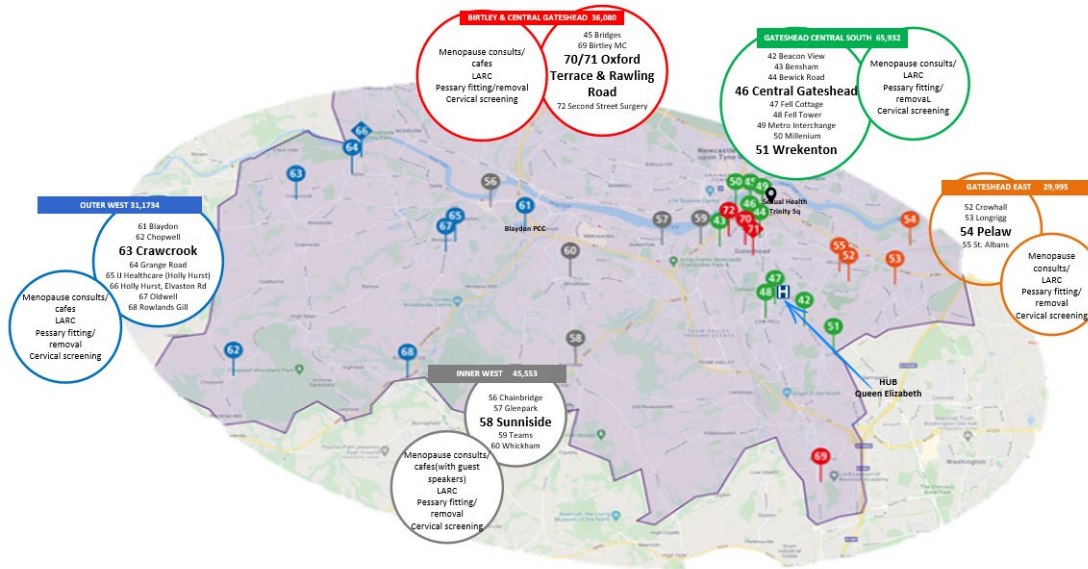
For reference

LARC delivery rates per PCN (per 1000 F 15-55yrs)



- LARC Health Equity Assessment identifies lower rates in the Inner West and Gateshead East localities
- The assessment also identifies lack of LARC providers in the South of Outer West (outreach services could support this locality)

Co-designed and co-produced model – hub and spoke and mobile / pop up



Practice locations

Map and PNCs updated from CBC (May figures)
Service provision taken from practice survey (March 24) and Protected Learning Time (July 24) - Practices in bold currently delivering all services



Core services

- **Menstrual problems assessment and treatment, including but not limited to care for heavy, painful or irregular menstrual bleeding, and care for conditions such as endometriosis and polycystic ovary syndrome**
- **Menopause assessment and treatment**
- **Contraceptive counselling and provision of the full range of contraceptive methods including LARC fitting for both contraceptive and gynaecological purposes (for example, LARC for heavy menstrual bleeding and menopause), and LARC removal, and emergency hormonal contraception**
- **Pessary fitting and removal**
- **Cervical screening**

Questions