



Case Study

Sunderland Women's Health Hub

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Sunderland Women's Health Hub

(part of NHS North East and North Cumbria Integrated Care Board (ICB))

Background

Situation in March 2023:

- LARC use well below national average and only available for contraceptive purposes.
- Long waiting lists for LARC in family planning clinics
- No functioning training programme for LARC fitters.
 - PCN pilot began:
Pilot accepted referrals directly from the 12 practices with no need for an initial GP appointment.
 - This seamless access to care was to be particularly beneficial in the menopause clinics where women indicated they need access to support with minimal barriers.

What happened after the first year?

March 2024:

- Successful bid to NE and Cumbria ICB → £200k allocated.
- All 38 practices in the city got access to a hub run by 2 GPs and 3 nurses.
- Offer of LARC Training to all clinicians in the Sunderland and South Tyneside Area
- Offer of USS training (latter via Teesside university) – this has led to 2 qualified gynaecology sonographers and 2 current sonography trainees.
- Additional services include sexual health, cervical smears and pessaries offered opportunistically.

What services are on offer in the Women's Health Hub?

- Primary care staff can support women through their reproductive life, menstruation through to menopause and beyond.
- Based at Hylton Medical Group, Pallion Health Centre in Sunderland
- Services offered include:
 - Contraception (clinics Monday, Tuesday, Friday) including long-acting reversible contraception (LARC).
 - Management of heavy menstrual bleeding (HMB), including ultrasound scanning.
 - Menopause counselling and treatment (clinics Monday/Tuesday/Thursday).
 - Cervical smears.
 - Pessary fitting.
 - Sexual Health

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- Currently accepting referrals from 38 practices (300K patients).
- Referral from the registered practice – no pre-appointment needed, except those being seen for ultrasound who need a clinician to clinician referral.
- Training to fit LARCs, become a LARC trainer and do ultrasound (the latter via Teesside university has led to 2 qualified gynaecology ultra sonographers and 2 current trainees).
- Additional services include sexual health, cervical smears and pessaries offered opportunistically.
- Provides full data interoperability and data sharing with practices with direct write backs into EMIS via the EMIS Primary Care Network (PCN).
- Hub staff:
 - 2 GPs with an extended role (GPwER) in women's health and menopause.
 - 4 nurse practitioners.
 - 3 sonographers.
 - Assisting nursing staff,
 - Administrator and part time manager

Is it good value for money?

- The 'Sunderland Women's Health Hub Model' had an independent evaluation carried out by Newcastle University in Spring 2025. The analysis found for every £1 invested; the hub generates £8 in benefits over 10 years (2025 independent analysis by Newcastle University¹).
- The evaluation findings estimated the costings for the hub would be:
 - £98,000 upfront costs required (training, equipment, project management).
 - £473,000 annually to run (primarily staff and equipment)
 - Benefits of over £37.6m over 10 years on an estimated £4.5m investment
 - Additional benefits related to
 - Reduced workplace absences,
 - Secondary care cost savings.
 - Improved quality of life.

This evaluation suggests Sunderland Women's Health Hub provides good value for money, with potential benefits outweighing the cost of running this service.

- From a Patient perspective, surveys demonstrate how much they value the service.

What does the future hold?

- £100k offered for 2025 – 26 (annual running cost £190k).
- Currently running at a loss and surviving on goodwill and 'passion to deliver a service for women' whilst looking for solutions i.e. access to recurrent funding,

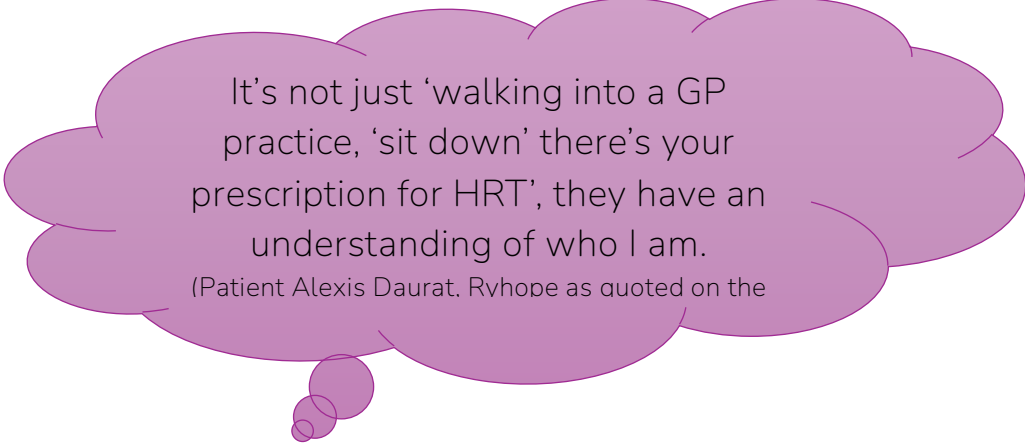
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- cost effective consumables etc.
- Local Authority are responsible for coils and implants but only have funding available for contraceptive fits, therefore, questioning any fitting carried out for non-contraceptive reasons.
- Grant application for money to help women get back to work was rejected, even with the good evidence of time off work due to HMB and menopause.
- This loss of funding is despite evidence that the hub model can provide good, empathetic care, close to home, and make savings to the NHS, whilst reducing waiting lists beneficial care to the women whilst making savings for the NHS. Unfortunately, the Grant application was rejected.
- USS service picks up diagnoses such as fibroids, endometriosis and adenomyosis.
- Without the hub, ultrasound skills may not be maintained.

Lessons to be Learnt

- Service was set up with no costs incurred for premises – GP rooms, reception and admin staff, chaperones and smear equipment were used.
- PCN provides support via ARRS roles.
- This cannot continue long-term and so recurrent funding is needed to make this a sustainable service – the money is due to run out in Feb 2026.
- **However, should the service not continue, it will have left a legacy of 10 healthcare professionals with new skills in USS or LARC fitting.**



It's not just 'walking into a GP practice, 'sit down' there's your prescription for HRT', they have an understanding of who I am.

(Patient Alexis Daurat. Rvhope as quoted on the

References

- 1) NIHR. [Evaluation of Sunderland's Women's Health Hub – value for money and additional benefits](#). Oct 2025.

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