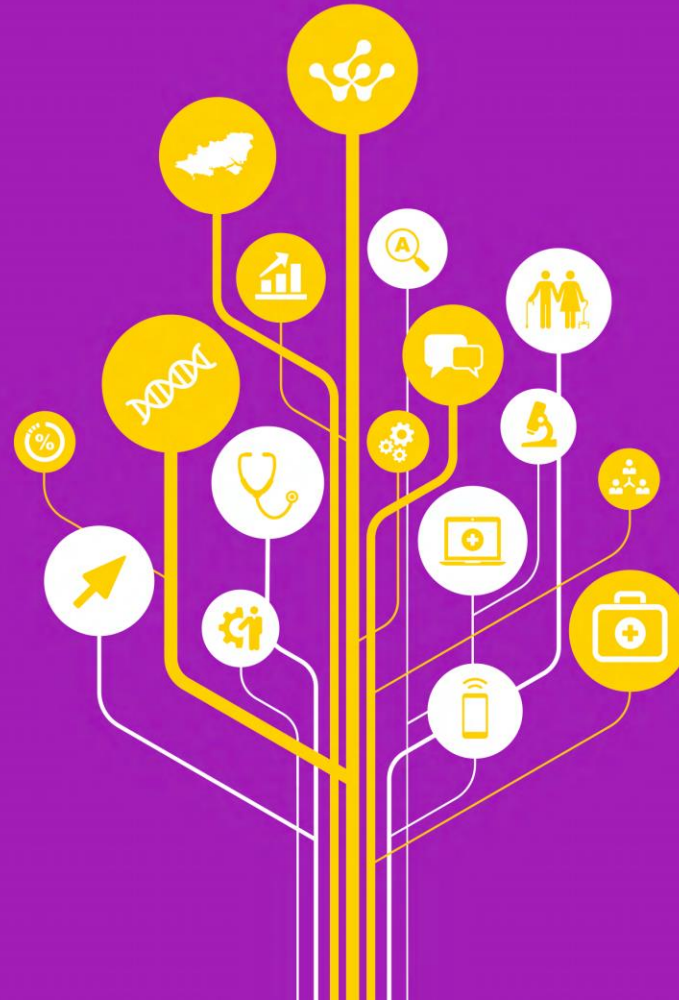


# Independent evaluation of the Dorset Women's Health Programme

Summary of full evaluation report

January 2026





## The evaluation team



Health  
Innovation  
Wessex

### Evaluation team

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### Disclaimer

This slide deck summarises the findings from the independent evaluation of the Dorset Women's Health Programme. The full findings are reported separately and will be available from the Insight library on the Health Innovation Wessex website.

The final report presents findings from an evaluation of the Dorset Women's Health Programme, commissioned by NHS Dorset. The conclusions in this evaluation are those of the authors and may not represent the views of other stakeholders.

### Declaration of interest statement

On occasion, we evaluate innovations that we have also supported. Whilst these evaluations are independent, for transparency we disclose our dual role where applicable. In this case, the delivery of the Dorset Women's Health Programme was supported by the Innovation Adoption Team (IAT) at Health Innovation Wessex. IAT also completed an innovation scan of innovations ready for adoption in areas of women's health. The evaluation was undertaken by the Health Innovation Wessex Insight team.

### Acknowledgements

The evaluation of the Dorset Women's Health Programme was funded by NHS Dorset. We would like to thank the project's stakeholders within NHS Dorset for their support and facilitation of this evaluation. Also, we would like to thank the wide range of staff that contributed to the interviews.

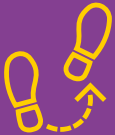




## Executive summary



The Dorset Women's Health Programme brought together health and voluntary sector stakeholders to tackle system-wide challenges for the women of Dorset across their life course. A county-wide survey and focus groups identified six priority projects: **Dorset Women's Health Website, Long-Acting Reversible Contraception (LARC), Menopause, Minoritised Groups and Mobile Support, Pelvic Floor Disorders, and Young Women's Physical and Mental Health.**



Key outputs included the **Dorset Women's Health website** with self-help resources and service signposting, **training for clinicians** on menopause, racial discrimination and inclusion, pelvic floor disorders, **1,100 Squeezy app licences, HPV vaccine assemblies** in five schools, and a **community pathway for LARC** for non-contraceptive purposes.



The evaluation team from Health Innovation Wessex collected the views of 24 staff involved with the programme. Staff felt that it has **improved access and experiences of healthcare** for Dorset women, **improved staff knowledge and skills**, introduced **innovation and new ways of working**, and resulted in **relationship building and collaboration** across sectors. Staff acknowledged that it is **too early to see the full impacts** from the programme, but assuming ongoing and increased use of the Dorset Women's Health Website, would expect to see an **increase in the use of self-help and more appropriate use of health services.**



Given the stage of programme delivery, a qualitative approach was most appropriate for capturing the experiences and perspectives of those involved in implementation. Moving forwards, it will be important to assess quantitative data regarding health outcomes and service use, and to include the perspectives of service users.





## Background

In March 2023, the government announced £25 million to create or expand Women's Health Hubs (WHH). This decision was informed by the *Women's Health Strategy: Call for Evidence* (DHSC, 2022), which received nearly 100,000 responses from women in England. The funding aimed to support Integrated Care Boards (ICBs) to introduce at least one WHH in areas without existing provision or expand hubs to cover wider geographical areas.

The Dorset Women's Health Programme (DWHP) brought together stakeholders from the health and voluntary sectors to consider solutions to system-wide challenges being faced by women across the life course.

To ensure that local projects reflected the needs of Dorset women, widespread consultation was conducted to build on the extensive work already started by Dorset Women Community Interest Company (CIC). Engagement activities included:

- A county-wide survey (with nearly 1000 responses)
- A series of focus groups with underrepresented communities including young women with learning disabilities, the traveller community and other minoritised groups.

A data-driven approach complemented this engagement, using baseline data to identify needs and to inform solutions.

These activities shaped the development of five strategic priorities (shown on the next slide) which informed the six focus areas of the Dorset Women's Health Programme.





## Strategic priorities for women's health

- **Tackling inequalities** and improving access to services particularly for women from minority backgrounds recognising cultural diversity, disability and other protected characteristics.
- Preventing ill health through **education** and information.
- Preventing ill health by **tackling the wider social and economic determinants of health** (education, economics, environment, crime, housing, employment).
- **Creating joined up care** across a woman's life course.
- Tackling **mental health** specific to women or where women experience bias or inequality including:
  - Peri-natal mental health
  - Menopause
  - Eating disorders
  - Personality disorders
  - Dementia

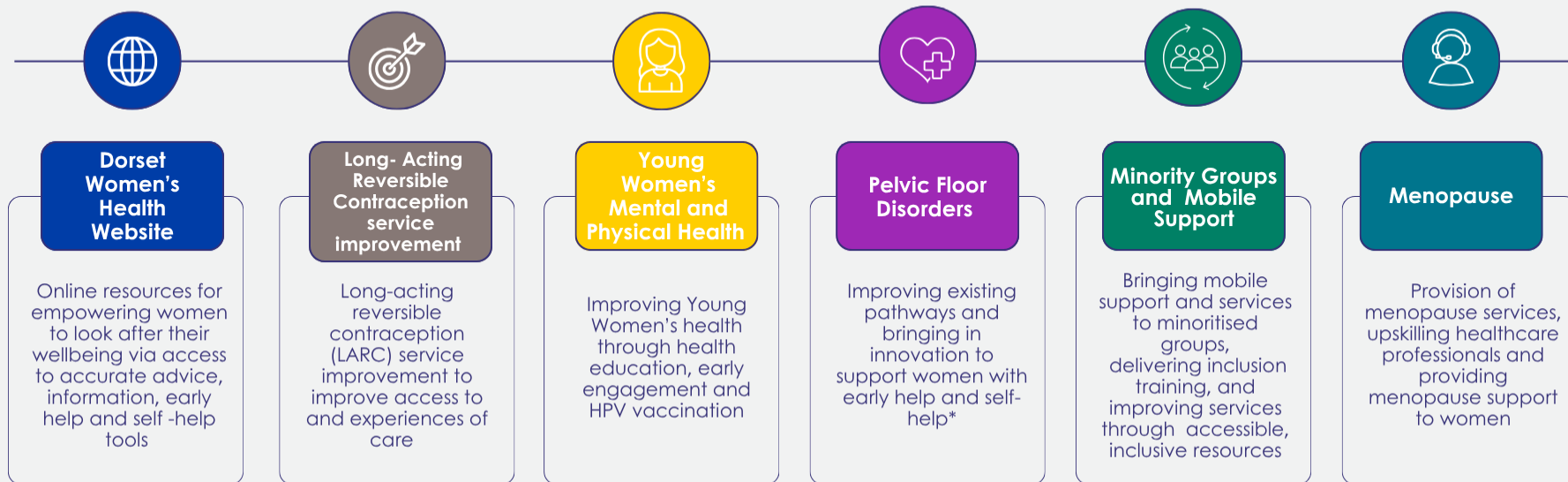




The Dorset Women's Health Programme (DWHP) brought together stakeholders from health and the voluntary sector to consider solutions to system-wide challenges being faced by women across the life course. NHS Dorset commissioned Health Innovation Wessex (HIW) Insight team to carry out an independent evaluation of the DWHP programme. The programme has six focus areas, as shown below.

The focus areas of the

# Dorset Women's Health Programme



\*The HIW Insight team have also conducted a separate evaluation of the Pelvic Floor Disorders project, titled 'Independent evaluation of a train-the-trainer programme to prevent and improve pelvic floor dysfunction across Dorset', available from the Insight Library on the Health Innovation Wessex website



## Main activities of projects

The Dorset Women's Health Programme generated a series of outputs through its six constituent projects, as shown below. The focus of these projects was determined through extensive consultation with women of Dorset as mechanisms to achieve the strategic priorities.

- The Dorset Women's Health website containing self-help resources, information and signposting to local services.
- Menopause training seminars for clinicians
- Co-design and delivery of staff training to raise understanding concerning racial discrimination, unconscious bias and inclusion.
- Creation and delivery of online and face-to-face Train the Trainer (TTT) programme for health professionals on pelvic floor disorders.
- Funding for 1100 Squeezy app licences to support women with pelvic floor dysfunction.
- Educational assemblies delivered by the School Age Immunisation Service (SAIS) across five schools with historically low HPV vaccine uptake.
- A community pathway for LARC for non-contraceptive purposes has been developed, with commitment from system-wide colleagues working in this field to take this forward.



## Evaluation approach

The evaluation aimed to answer the following questions:

1. What difference has the DWHP made to women in Dorset in terms of:
  - a. Access to health information and evidence-based early self-help?
  - b. Access to care and experiences of care (including effects for health inequalities)?
  - c. Health outcomes?
2. What are key stakeholders' experiences of implementing the project?
  - a. What were the associated barriers, facilitators and influences to setup and delivery?
3. What are the factors to consider that can help progress work following the end of funding streams?
4. Has the DWHP impacted on research into women's health in the region, and how?

We conducted 16 online qualitative, semi-structured interviews with staff involved in the programme, received five written responses to the interview questions and spoke to three further staff about its research impacts.

Project name	Number of participants
Menopause	3
Young Women's Mental & Physical Health	5
Website	2
LARC service improvement	2
Minority Groups & Mobile Support	1
Pelvic Floor Disorders	4
Strategic programme level overview	4
Research discussions	3
<b>Total</b>	<b>24</b>

We analysed the data to identify themes, which are shown on the next slide.



# The Dorset Women's Health Programme Theme Map

**AIMS**

**FACILITATORS**

**CHALLENGES**

**OUTCOMES**

**PROGRAMME SUSTAINABILITY**

Upskilling health professionals and improving ways of working

Community needs led

Effective leadership and coordination

Collective passion and commitment

Teamwork and collaboration

Prevention and self-help through increased access to health information and resources

Improving access and health outcomes

Challenges related to the website

Limited resources

Data limitations and barriers to insight

Project-specific sustainability plans

Involving the right stakeholders

Too early to see full impact

Innovation and new ways of working

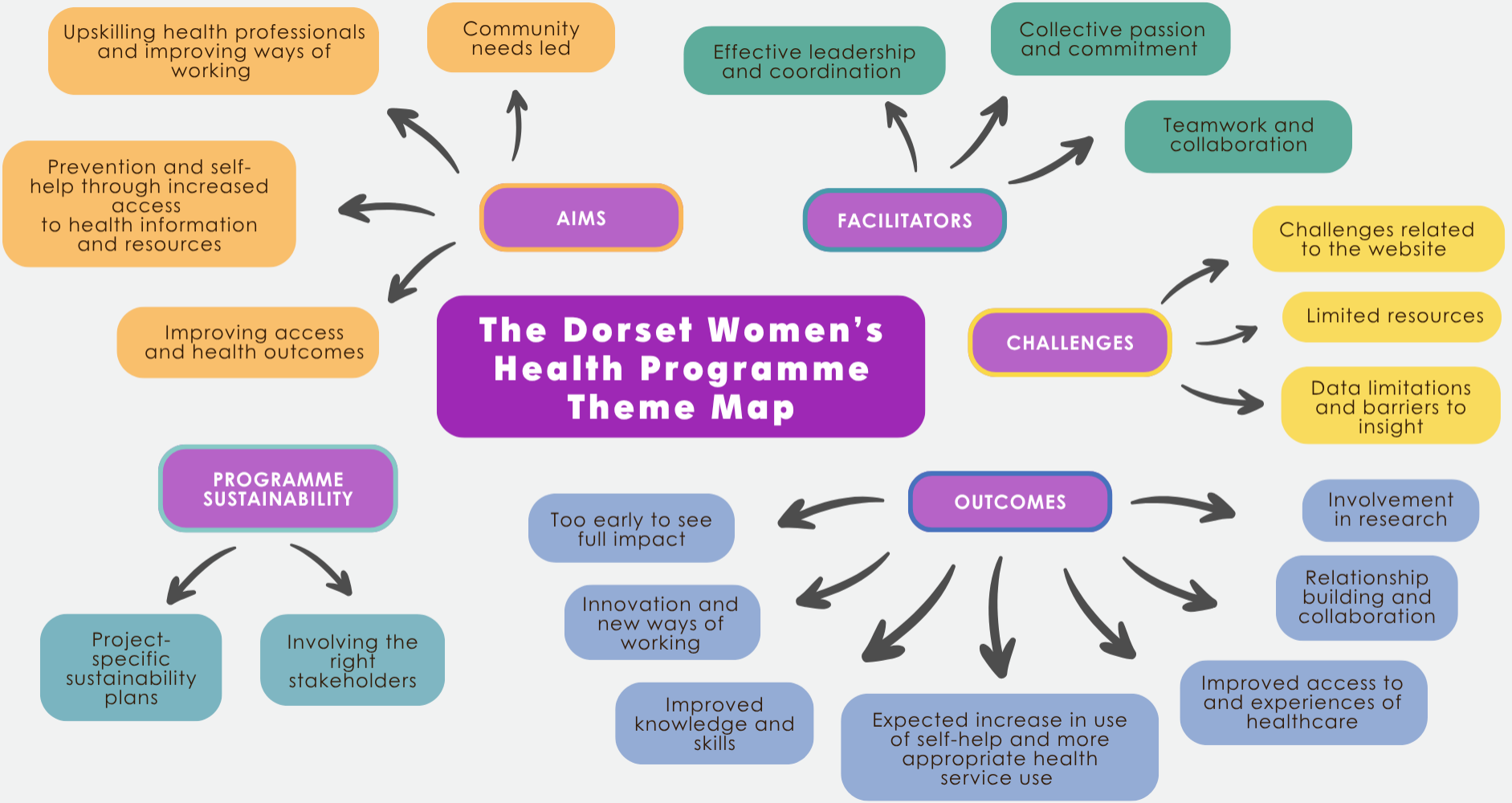
Improved knowledge and skills

Expected increase in use of self-help and more appropriate health service use

Involvement in research

Relationship building and collaboration

Improved access to and experiences of healthcare





## Facilitators of Dorset Women's Health Programme

Theme identified	Example quotes
Teamwork and collaboration	<p>"Everyone is helping each other." Participant 04</p> <p>"Really great partnership collaboration and joint working. We built fantastic trusting relationships between stakeholders, and this was instrumental in how much was achieved in the short time and limited resources." Participant 21</p>
Effective leadership and coordination	<p>"The project managers did well to bring everybody together and tap into people's expertise." Participant 07</p> <p>"Dorset Women's Health [sic] CIC is now the owner of the website. So it's still hosted by NHS Dorset, but they are responsible for updating, reviewing and making sure it's all working fine." Participant 19</p> <p>"Our colleagues at Health Innovation Wessex have also been paramount to the success of this programme – their expertise in innovation, horizon scanning and adoption have been absolutely key." Participant 17</p>
Collective passion and commitment	<p>"Collective passion and commitment to (a) the subject – we were all hugely invested in improving women's experiences of receiving/finding health information and support (b) serving the women of Dorset. This was universally a priority for everyone and really noticeable as a different way of working to other big programmes I've worked on in the past." Participant 21</p>





## Challenges of Dorset Women's Health Programme

Theme identified	Example quotes
Limited resources	<p><i>"We had to be quite specific and targeted with what we did do with that capacity and that resource..."</i> Participant 09</p> <p><i>"Staff have had to absorb the demands of the work stream into their current work streams."</i> Participant 06</p>
Challenges related to the website	<p><i>"I think it needs more information on there about the conditions. (I) think there needs to be in-depth information."</i> Participant 02</p> <p><i>"We want the information to be evidence based and clinically approved, but clinicians haven't actually been given any extra capacity in order to be able to help. So some of them are helping and it's literally goodwill."</i> Participant 05</p>
Data limitations and barriers to insight	<p><i>"The data...wasn't really broken down to these specific aspects that we wanted."</i> Participant 08</p> <p><i>"So what data exists and then the quality of it for Women's Health is a significant problem and that goes right down to the coding for some things just don't exist, particularly in primary care. And that makes it really, really, hard to then understand what the actual need is."</i> Participant 19</p>





## Outcomes of the Dorset Women's Health Programme

Theme identified	Example quotes
Improved knowledge and skills	<p>"We audited [healthcare professionals] and the results were very positive... people were more confident about prescribing HRT." Participant 14</p> <p>"[involvement in the programme] has helped me to understand some of the inequalities and where they could be." Participant 08</p>
Improved access to and experiences of healthcare	<p>"We have been able to disseminate 1100 of Squeezy app [licences]." Participant 04</p> <p>"We now have a GP at each site who's got specialist interest in menopause and is confident prescribing HRT." Participant 13</p> <p>"The [pelvic floor disorders] training had made a significant difference to one individual because they had been assessed, had appropriately been diagnosed with a prolapse and been sent in..." Participant 19</p>
Relationship building and collaboration	<p>"The biggest achievement has been the bringing together of stakeholders in recognition that improvements needed to/could be made, and the co-operation that took place." Participant 21</p> <p>"I think our engagement with community groups has been really great and the partnership working, the collaboration around inclusive materials as well, the willingness for different stakeholders to support us has been incredible." Participant 03</p>





## Outcomes of Dorset Women's Health Programme- continued

Theme identified	Example quotes
Involvement in research	<i>"Abstract submission for the British Menopause Society around the impact and efficacy of the menopause webinars."</i> Participant 03
Relationship building and collaboration	<i>"I think our engagement with community groups has been really great and the partnership working, the collaboration around inclusive materials as well, the willingness for different stakeholders to support us has been incredible"</i> Participant 03
Innovation and new ways of working	<i>"A genuine shift to a new way of working that puts women's needs and their involvement in co-design at the centre of a programme."</i> Participant 21  <i>"if you look at the programme against the budget, it achieved an awful lot within 12 months... innovation wise, we adopted eight innovations"</i> Participant 19
Expected increase in use of self-help and more appropriate health service use (linked to ongoing and increased use of the website)	<i>"fewer (visits) to GPs and (referrals to some women's health services in some specialities, as a result of women being able to access information to self-help, via our website"</i> Participant 17  <i>"reduced referral to secondary care services where women understand pathways and can self-manage or understand the role of their GP and other health practitioners."</i> Participant 21
Too early to see the full impact	<i>"I think right now maybe it might be too soon. But I think in the long run it's something that we will definitely be able to evaluate more in terms of impact."</i> Participant 08





## Sustainability of Dorset Women's Health Programme

Theme identified	Example quotes
Involving the right stakeholders	<p><i>"We need to fund the clinicians working on the projects to have backfill so that they've got the time to dedicate to it."</i> Participant 10</p> <p><i>"There needs to be a good practice around how it's going to be maintained with an engagement of the right stakeholders to oversee it."</i> Participant 06</p> <p><i>And I think we're going to be looking very much on our relationship with Dorset Women CIC and with Health Innovation Wessex as to how we...really to try and keep this going and keep the improvement going that we've seen already.</i> Participant 20</p>
Project-specific sustainability plans	<p><i>"I ensured that the LARC projects were able to continue outside the wider programme and be included as part of ongoing commissioner contract management processes, as opposed to being stand-alone and having to stop."</i> Participant 16</p> <p><i>"I think it will continue to grow with the Dorset Women CIC overseeing it...because it feels more community, it feels more Dorset led, and I think you know, we've got the sustainability built in there."</i> Participant 19</p> <p><i>"And because obviously the funding of the [Squeezy app] licences will come to an end, but I think the cost per month is ...minimal. So, whilst that might be a barrier for some individuals, it's like £2 or something...For the majority it won't be and there's a lot of private users already."</i> Participant 19</p>





# Limitations

- **Evaluation Methodology**

Given the stage of programme delivery, an evaluability assessment determined that a qualitative approach was most appropriate for capturing the experiences and perspectives of those involved in implementation. However, the addition of quantitative data would be required in order to provide a comprehensive assessment of the programme's measurable outcomes and broader population-level impact.

- **Incomplete Implementation**

At the time of data collection, several components of the programme were still in development or had only recently been launched. As a result, the evaluation could not fully assess the effectiveness or long-term impact of these elements.

- **Participant Sample**

The evaluation engaged with a limited number of stakeholders involved in the design and delivery of the programme. The perspectives of service users, particularly women and communities directly impacted by the DWHP, were out of scope for this evaluation, as agreed with the commissioner. This limits the ability to assess the programme's relevance, accessibility, and effectiveness from the viewpoint of its intended beneficiaries.

- **Timing of Evaluation**

The evaluation was conducted during or shortly after the initial implementation phase. As many of the programme's intended outcomes are likely to emerge over time, this timing restricts the ability to assess sustained impact or long-term change.





## Conclusions

- **The DWHP generated a series of outputs through its six constituent projects.**

- **Perceived outcomes of the Dorset Women's Health Programme**

Participants felt that the DWHP has resulted in improved knowledge and skills for staff, improved access to and experience of healthcare for Dorset women, innovation and new ways of working, and relationship building and collaboration. With ongoing and continued use of the Dorset Women's Health Website, participants expected an increased use of self-help strategies and more appropriate use of health services.

- **Stakeholder Experiences**

Key facilitators of the programme included teamwork and collaboration, collective passion and commitment and effective leadership and co-ordination. Dorset Women CIC were instrumental in extensive engagement work leading up to, and during the period of the DWHP. Their key role in maintaining the website moving forwards was also described. Challenges of the programme were described as limited resources, challenges related to creating and maintaining content for the website, as well as data access challenges.

- **Sustainability Post-Funding**

Measures taken to ensure the sustainability of the programme included Dorset Women CIC's role in maintaining the website, arrangements for adoption of the new LARC community pathway into commissioning plans, and the continuation of pelvic floor Train the Trainer training (with CPD accreditation plans). Sustaining progress was seen to require the involvement of enthusiastic and reliable stakeholders. Mechanisms to maintain communication between stakeholders were recommended (eg newsletters, meetings).

- **Research activity**

Participants described an abstract/poster submissions to British Menopause Society, a service evaluation, research proposals, and identification of evidence gaps. DWHP was felt to have stimulated interest in collaboration and alignment with local priorities. Some participants felt that further progress needs improved data access, and clinician time for research.





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