Wessex SECURE DATA ENVIRONMENT

Part of the NHS Research Secure Data Environment Network

NHS

Communications and Community Involvement & Engagement Strategy 2026/27

Maintaining public trust and demonstrating public benefit from NHS data-enabled research

July 2026 | Version 2

This strategy sets out how Communications, Community Involvement and Engagement (CIE) will help Wessex SDE build understanding, support public influence, demonstrate public benefit, and maintain confidence in the responsible use of NHS data for research. These activities help create the conditions that allow the SDE to deliver its mission, achieve its organisational objectives and grow responsibly. Patient and public involvement and engagement (PPIE) remain a core part of this approach.

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This plan explains how Wessex Secure Data Environment (SDE) will earn, maintain and demonstrate public trust in the way NHS patient data is used for research.

The Wessex SDE supports research that uses NHS patient data to improve health and care, and to return value to patients, communities and the NHS. This kind of research can help us better understand illness, treatment, services and outcomes. It can also help the NHS learn what works, where care can improve and how services can better meet people's needs.

But we also recognise that using NHS data for research raises important questions. People want to know how their information is protected, who can use it, what choices they have, who is checking the work, and how patients and the public will benefit. These are reasonable questions, and they deserve clear answers.

Trust cannot be assumed because this work is NHS-led or because its aims are good. Trust has to be earned continuously. That means being open about what we are doing, explaining things clearly, using strong safeguards, involving people in decisions, and showing the benefits that research is creating.

Talking with communities and involving patients and the public must not happen only after decisions have already been made. They should be part of how the SDE is run, developed and improved. Public contributors and communities should be able to shape how the SDE works, how it explains itself and how it responds to public concerns.

Different people will want different levels of information. Some people may simply need to know that the SDE exists and that NHS data may be used for research. Others may want to understand a little more about how data is protected and what choices they have. Some will want to look in detail at how the service is governed, how decisions are made and what research is taking place.

This plan is about ensuring that these different tiers of information are available to the public. It is also a part of that 'start simple, dig deeper' approach, providing that extra level of detail for people about our communications and invovlement plans. Its purpose is to show what Wessex SDE will do during 2026/27 to support public understanding, public influence and public benefit.

The year ahead is about moving from explaining what the SDE is to showing more clearly what it is doing, what is changing, and what benefit is being created. We will do this by making information about NHS data use clearer, easier to find and easier to understand. We will strengthen public involvement through our Digital Critical

Friends group, focus groups with different groups across our community, and wider outreach where this is needed. Where possible we will link this to active research programmes and studies, which bring the world of NHS data to life in ways that are often both exciting and surprising.

We will also show more clearly how public feedback has influenced decisions, materials, policies and priorities. We will make public benefit more visible through case studies, impact stories, research outputs and the Annual Report. We will also help researchers and NHS partners understand not only how to use the SDE, but what public expectations they need to meet.

The SDE is also developing as new kinds of research become possible, including research that brings together different types of health data and research involving artificial intelligence. These innovations deserve debate. We need to know if they are acceptable to patients and the public in Wessex before they are adopted. We must ask if additional rules are needed and how to explain them to the public in an accessible, engaging and transparent way.

This is a practical plan. It sets out actions, outputs and ways of checking whether progress is being made. Success will be judged by whether people can understand the SDE, see how they can influence it and recognise the benefit it is creating.

Wessex SDE must be secure and well governed. It must also be understandable, accountable and clearly useful to the public.

Mark Heffernan
Managing Director, Wessex Secure Data Environment

1. Context

1.1 Mission, Vision, and Organisational Objectives

The Wessex Secure Data Environment exists to enable research that improves patient outcomes and returns value to the NHS. Its mission is:

> *To enable impactful research that improves patient outcomes and returns value to the NHS.*

Looking ahead, its vision is:

> *By 2030, Wessex SDE will be England's leading regional test bed for linked, longitudinal and multimodal health data, enabling research and AI that improves care.*

These statements matter because they set the purpose of this strategy. Communications and Community Involvement and Engagement (CIE) are not separate from the SDE's mission. They help create the conditions in which that mission can be delivered: public trust, clear understanding, visible public benefit, meaningful public influence and confidence among researchers and data partners.

The SDE's organisational objectives for 2026/27 follow from this mission and vision.

1. **Build an integrated regional test bed for real-world, multimodal research data and AI**
   Curate linked acute, GP, community, and mental health data, and provide the environment to develop, test and scale tools and algorithms.

2. **Deliver an optimal researcher experience from discovery to delivery**
   Make it clear, fast, and reliable for researchers to discover, access, and use SDE data through trusted governance, responsive support, and efficient internal workflows.

3. **Operate as a trusted, well-governed and financially sustainable SDE**
   Maintain social licence through visible public benefit, inclusive engagement, strong assurance, mature financial accountability, and clear value return to the NHS.

Each objective has implications for this strategy. Building a regional data test bed requires public confidence in how data is accessed, protected, and used. Improving researcher experience requires clear information, consistent messaging, and support for responsible research. Operating as a trusted and sustainable SDE requires visible public benefit, inclusive involvement, strong assurance, and clear value returned to the NHS.

Social licence is therefore part of the SDE's operating model. The SDE can only build data assets, support researchers, and operate sustainably if patients, public contributors, NHS organisations, and data partners can see that NHS data is used safely, transparently and for public benefit.

1.2 National, Regional and Local Context

Nationally, secure data environments are becoming more consistent and connected. The NHS Research SDE Network, the emerging Health Data Research Service and related national work are creating clearer routes for secure, approved access to health data.

Regionally, Wessex works as part of the Southern SDE Partnership. This collaboration supports shared learning, aligned approaches and future convergence where that improves researcher experience, governance and value returned to the NHS.

Locally, Wessex has strong foundations: a population of around three million people, diverse coastal, rural, and urban communities, strong NHS and university partnerships, and a mature research and innovation ecosystem. The role of Wessex SDE is to connect these strengths into a trusted platform for research and AI that improves care.

1.3 Social Licence and Public Trust

Delivery depends on more than technology, data, and governance. The Wessex Secure Data Environment (SDE) must continually earn public confidence by showing how NHS data is used safely and how it benefits patients, communities, and the NHS.

Over several years of public dialogue, community engagement, and public involvement, one message has remained clear. People are generally supportive of NHS data being used for research when they can see a clear public benefit. They want research that improves care, addresses important health challenges, and delivers value for patients and the NHS.

These conversations have also shown that trust grows through understanding. People are more willing to discuss data use, privacy, governance, and choice when they first understand the purpose of the research and the benefits it could bring. They expect strong safeguards, clear oversight, meaningful public involvement, and respect for individual choice. Support is not automatic, but many people want NHS data to be used responsibly to improve health and care.

The communications approach developed by Wessex SDE reflects this learning. Rather than starting with technical explanations about data systems, it starts with the research itself. Research is what people care about most and what helps them see the potential benefits.

We explain:

> **Powerful research. Powered by NHS data. Enabled by the Wessex SDE.**

This sequence is deliberate.

- **Powerful research** shows how research can improve health and care.
- **Powered by NHS data** explains how information from patient records helps researchers answer important questions.
- **Enabled by the Wessex SDE** shows how secure technology, governance and safeguards make this work possible.

By helping people understand what research is taking place, why it matters and how it is carried out safely, the SDE can support more informed conversations about the use of NHS data. These conversations help build understanding, confidence, and trust.

This strategy is built on that principle: making public benefit clear, supporting meaningful public involvement, and helping people understand how NHS data can be used responsibly for research.

1.4 Community Involvement and Engagement

This strategy uses the term **Community Involvement and Engagement (CIE)** rather than **Patient and Public Involvement and Engagement (PPIE)** alone. This reflects the increasingly broad range of activities needed to maintain social licence within a complex programme such as the Wessex SDE.

PPIE remains central to our approach and continues to provide the foundation for how people influence decisions, challenge assumptions, and shape the development of the SDE. However, experience has shown that involvement alone is not enough. Building and maintaining public confidence also requires clear communication, public assurance, community engagement, transparency, feedback, partnership working, and visible evidence of public benefit.

This reflects a wider shift across the NHS and research sector towards working with people and communities through a range of complementary approaches rather than treating involvement, engagement, and communications as separate activities. CIE

therefore provides an umbrella for the full range of activity required to build understanding, support public influence, communicate benefit, and maintain confidence in the responsible use of NHS data for research.

Throughout this strategy, PPIE should be understood as a core component of CIE, sitting alongside communications, transparency, public assurance, and community engagement activities that together help maintain the Wessex SDE's social licence.

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2. Purpose

2.1 Why this strategy exists

This strategy explains how communications and community involvement and engagement (CIE) will help Wessex SDE deliver its mission and organisational objectives. At the heart of this is building and sustaining the SDE's social licence.

2.2 What this strategy seeks to achieve

- This strategy provides the framework for how Wessex SDE will approach communications, community involvement, and engagement during 2026/27.
- It translates the SDE's wider mission, vision, and organisational objectives into a programme of public-facing activity designed to support social licence and demonstrate public benefit. In doing so, it brings together communications, public involvement, community engagement, public assurance, and researcher-facing information within a single strategic approach.
- The strategy is intended for public contributors, patients, researchers, NHS organisations, academic partners, and others involved in delivering or supporting the Wessex SDE. It describes the priorities, delivery approach and reporting arrangements that will guide this work during the year.

It does not replace operational plans, research governance processes, information governance controls, the Transparency Policy, or internal performance management arrangements. Instead, it provides the public-facing framework that connects these activities and explains how they contribute to building understanding, supporting public influence, and maintaining confidence in the use of NHS data for research.

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3. Strategy

The strategy is organised around four strategic objectives. Together they support the SDE's organisational objectives and the social licence needed to deliver them. The objectives define the outcomes this programme is seeking to achieve. The activities that deliver them are set out in the Implementation Framework.

Objective 1: Transparency and Public Assurance

Definition: People can understand how NHS data is used, protected, and governed within Wessex SDE.

The SDE can only use NHS data for research if people have confidence that data is used responsibly. Public dialogue has shown that transparency, privacy, accountability, and respect for choice are foundations of trust. This objective supports the SDE's ambition to operate as a trusted, well-governed service and underpins all research enabled through the platform.

The approach is to make public information clear, accessible, and easy to verify. People should be able to start with a simple explanation and then dig deeper into the detail of data use, governance, safeguards, choices, and public benefit.

Success looks like:

- People can easily find and understand information about the SDE.
- Safeguards, governance, and choices are clearly explained.
- Transparency is embedded in how the SDE operates, not treated as a one-off exercise.

Objective 2: Community Involvement and Partnership

Definition: People and communities can influence the development, governance, and operation of Wessex SDE.

Public trust is stronger when people can influence decisions, not just receive information about them. Wessex SDE has been shaped by public dialogue, broad engagement with Wessex communities, and the active involvement of the SDE's Digital Critical Friends group. This objective supports social licence through inclusive

engagement and reflects public values of working together, openness and accountable decision-making.

The approach is to use involvement where it can shape real decisions, at the right level of depth for the issue. This means maintaining standing public involvement through Digital Critical Friends, using wider community engagement where needed, and feeding back clearly on what changed.

Success looks like:

- An active Digital Critical Friends group that reflects the diversity of Wessex.
- Community involvement and engagement that is inclusive, proportionate, and focused on meaningful questions where people can have genuine influence.
- Public contributors can see where their input has influenced decisions.
- Public contributors report that their involvement is valued and useful.

Objective 3: Public Benefit and Impact

Definition: Showing how NHS data-enabled research delivers value for patients, communities, researchers, and the NHS.

The SDE exists to enable research that improves patient outcomes and returns value to the NHS. Public support for health data research is closely linked to evidence that it delivers benefit. This objective brings together the SDE's mission, organisational objectives, and social licence by showing that NHS investment, public trust and secure data access are generating useful outcomes.

The approach is to make public benefit visible and evidence-led. This means capturing the value created by SDE-enabled research, explaining it in plain English, and showing how research insights can support patient care, population health, service planning, and NHS value.

Success looks like:

- Research outcomes and benefits are visible and understandable.
- Value returned to the NHS is described clearly and credibly.
- Public benefit becomes the central public narrative of the Wessex SDE.

Objective 4: Researcher, Partner, and System Engagement

Definition: Researchers, data partners, and NHS organisations can participate in and benefit from Wessex SDE.

Public benefit can only be realised if researchers use the SDE, data partners contribute data and NHS organisations support its development. Public dialogue has shown that people expect NHS data to be used actively and responsibly to improve care, not simply held securely. This objective supports the SDE's ambition to become a leading regional test bed for research data and AI, while keeping growth aligned with public expectations and NHS values.

The approach is to support a clear, credible, and consistent SDE offer for researchers and partners. This includes explaining what the SDE enables, how governance works, what public expectations apply, and how partners can see the value returned from their contribution.

Success looks like:

- Researchers understand and value the SDE offer.
- Data partners and system stakeholders see clear value in participation.
- Engagement supports responsible, useful, and publicly acceptable research.

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4. Implementation Plan

This section explains how the strategy will be delivered in practice. The work is grouped under the four strategic objectives, and delivery will be shared across the SDE team and its partners. Communications and CIE teams will lead some work directly, support other activity, and help ensure that public-facing material is clear, accurate and consistent.

4.1 Transparency and Public Assurance

Transparency is one of the foundations of the Wessex SDE's social licence. People consistently tell us that they are more likely to support the use of NHS data for research when they can see the benefits being delivered, understand how data is protected, and learn more about who is using data and how the system operates.

Our approach is based on a co-designed transparency model developed with public contributors and reflected in the SDE's transparency and communications policies. It is built around the principle that people have different information needs depending on their interests, concerns, and level of involvement.

The transparency model comprises three tiers:

- **Tier 1: Public information** – accessible, public-facing information that helps people understand what the SDE is, why NHS data is used for research and the safeguards that protect patient information. In line with NHS and public sector accessibility principles, this information is provided primarily through web-based content.
- **Tier 2: Patient notification and public assurance** – more detailed information for people who want to understand how the SDE operates, including patient notification materials, governance arrangements, public assurance information, and the choices available to individuals. Typically, this is provided as leaflets or posters, available in both print and digital formats.
- **Tier 3: Data, research, and transparency reporting** – detailed information about the operation of the SDE itself, including datasets, approved studies, research outputs, publications, and regulatory information for those who wish to explore these areas in greater depth.

People access and understand information in different ways. So, some materials need to be available in accessible and Easy Read formats, while others need to be provided as printed leaflets, posters and other resources that can be displayed in GP practices, hospitals, and other NHS settings. Taken as a whole, our approach

provides a structured route from basic awareness through to detailed transparency, allowing people to access the level of information that is right for them.

The work also supports the SDE's operational compliance with transparency, patient notification and public information requirements associated with regulatory approvals and NHS data use. This includes maintaining appropriate patient-facing information at NHS points of care, supporting Health Research Authority (HRA) requirements, and ensuring that information about data use, patient choices and opt-out mechanisms remains accessible and up to date.

A. Website and public information

The Wessex SDE website will continue to serve as the primary public information resource for the programme. Most of the core content is already in place. During 2026/27, the focus will be on maintaining and improving the website, ensuring that information remains accurate, accessible, and easy to navigate as the SDE continues to develop.

The website forms the first tier of the SDE's transparency model. In line with NHS and public sector accessibility principles, it will provide the primary source of public information in accessible web format, helping people understand what the SDE is, why NHS data is used for research, how data is protected and where they can find further information.

We will make it easier for people to move between these simple explanations and the more detailed patient information, transparency, and public assurance materials available elsewhere on the site. The website will act as the central point through which these resources are connected, helping people find the information they need without becoming overwhelmed by unnecessary detail.

Outputs will include:

- Maintenance and periodic review of core website content, including improvements to navigation, accessibility and usability if required.
- Plain-English information about the SDE, NHS data, research, and public benefit.

B. Patient notification materials

Patient notification materials are typically leaflets and posters in print or as digital documents that explain the Wessex SDE. They provide first tier information in accessible formats that can be used in healthcare settings (such as GP surgeries or hospitals) and more detailed second tier information for people who want to dig

deeper into how the SDE works and enables the use of NHS patient data is used for research.

During 2026/27, we will focus on structure of our information resources, filling gaps in material that patients and the public may expect to be available, increasing availability of accessible formats, meeting regulatory requirements for information provision, and ensure compliance by data partners in promoting these assets in public-facing point of care facilities like General Practice or hospital waiting rooms. This ensures that access to tiered information resources is available and consistent across partner organisations wherever people are most likely to have questions about the use of NHS data for research.

The rationale for this work is clear: driven both by our social licence, ethics, and compliance. Many people whose data is included within the Wessex SDE may be unaware that information from their GP practice, hospital or another NHS organisation is being used to support research. As this data is used without seeking individual consent, it is important that people have clear information about what is happening, why data is being used, how it is protected and what choices are available to them.

The first tier of the transparency model consists of information available at NHS points of care, including GP practices, hospitals, and other healthcare settings. Posters, leaflets, and other patient-facing materials provide a simple introduction to the Wessex SDE, its purpose and the safeguards that protect patient information, while signposting people to further sources of information.

The second tier provides more detailed information for those who want to explore the topic further. We will maintain and refresh these patient information resources, briefing materials and supporting content that explain how data is accessed and protected, the governance and oversight arrangements in place, the benefits of research, and the choices available to individuals.

Outputs will include:

- Patient information leaflets, posters, and equivalent material
- Accessible and alternative-format patient information.
- Information resources for GP practices, Trusts, and other data partners.
- Support for distribution through participating organisations.

C. Data, research, and publications

This workstream maintains the detailed transparency information that sits behind the SDE's public-facing communications and public benefit reporting. This is the third tier of detail. While most people will engage with high-level explanations, case studies and examples of impact, a smaller group of patients, public contributors, researchers, journalists, and other interested stakeholders want to explore the underlying detail of what data is available, how it is being used and what research activity is taking place.

These resources provide that deeper level of transparency. They support compliance with transparency requirements, enable consistent reporting across the SDE, and provide the evidence base from which public-facing stories, case studies and impact summaries can be developed. They also underpin the Public Benefit and Impact pillar (Section 4.3), providing the data, evidence and research outputs needed to demonstrate how the SDE is delivering value for patients, communities, and the NHS.

Together, these resources form the third tier of the SDE's transparency model, providing detailed information for those who wish to look beyond summary explanations and explore the activity taking place within the SDE.

Outputs will include:

- Maintenance of the Data Use Register, Data Capability Register, and HDR UK Gateway dataset information and updates.
- A public-facing publications and research outputs register.

D. Regulatory assurance and public accountability

The Wessex SDE operates under Health Research Authority (HRA) approval, including support under Section 251 of the NHS Act 2006, advised by the Confidentiality Advisory Group (CAG). These approvals allow the SDE to receive and use confidential patient information for approved research purposes without individual consent, subject to strict requirements for security, privacy, transparency, and public involvement.

During 2026/27, we will support the renewal of HRA and CAG approvals, secure any necessary amendments to support new use cases, data flows, or platform capabilities, and demonstrate ongoing compliance with regulatory requirements. This will include maintaining patient information materials, evidencing, and reporting public involvement activity, meeting transparency commitments, and ensuring that significant changes to the service are accompanied by appropriate public communication and assurance.

This work helps ensure that the Wessex SDE continues to meet its regulatory obligations and retain the approvals on which it depends. It also provides clear evidence that public perspectives are actively considered in the governance and development of the service. By capturing and reporting how public feedback has influenced decisions, policies, and service improvements, we will demonstrate not only compliance with regulatory requirements, but also the continuing role of public involvement in strengthening the SDE's accountability, transparency, and long-term sustainability.

Outputs will include:

- Public involvement evidence supporting relevant HRA and CAG submissions.
- Public-facing materials required by regulatory and assurance frameworks.

E. Choice, opt-outs, and public confidence

Throughout our public dialogue programme, people have consistently told us that trust depends on having meaningful choices about how their information is used. Providing clear, accessible information about opt-outs is therefore not simply a legal or regulatory requirement; it is a key way in which the SDE demonstrates respect for individual choice.

We will continue to explain the available opt-out options and make it easier for people to find and understand information about their choices. We will also support the development of monitoring and reporting that helps the SDE track changes in public confidence over time and across the region. This will enable us to identify areas where concern, misunderstanding or declining trust may be emerging and respond appropriately.

Our aim is not to influence people's decisions, but to support informed choice and ensure that the SDE listens and responds when public confidence changes.

Outputs will include:

- Public information explaining available opt-out routes.
- Monitoring and reporting of opt-out trends.

4.2 Community Involvement and Partnership

Community involvement is how the SDE ensures that public perspectives inform its development, governance, and use. Public dialogue has shown that people do not only want information about how the SDE works. They want meaningful opportunities to scrutinise proposals, contribute to decisions, and help shape the way NHS data is used for research. They want public representatives with a seat at the table at the least, and some opportunities for direct involvement.

This pillar brings together the SDE's public and patient involvement and engagement (PPIE) activity, combining standing involvement through the Digital Critical Friends with targeted engagement and co-design where wider community insight is needed. The aim is to ensure that public contributors have a recognised role in reviewing, challenging and improving the SDE, with involvement focused on real decisions, supported appropriately, and reported back clearly.

F. Digital Critical Friends programme

The Digital Critical Friends are the SDE's standing public involvement group. They provide informed challenge on how the SDE communicates, governs, and explains the use of NHS data for research.

During 2026/27, we will strengthen and refresh the programme as a core part of the SDE's CIE model. We will run regular meetings alongside focused sessions on priority policies, materials, and decisions, with an annual work plan developed jointly with Digital Critical Friends to reflect both SDE priorities and public concerns.

A key focus for the year will be rebuilding membership to around 20 active participants. We will deliver a targeted recruitment and refresh programme that brings in new perspectives while retaining the experience of existing members, with particular attention to broadening the range of backgrounds, experiences and communities represented.

We will also introduce a standard onboarding package for new members. This will provide clear information about the SDE, the role of Digital Critical Friends, participation expectations, available support, and key topics such as data use, governance, and public benefit. The package will be designed for reuse in future years and, where useful, across the NHS Research SDE Network.

To keep involvement meaningful and sustainable, we will respond to member feedback by varying topics, rotating opportunities for contribution and creating more flexible ways for members to participate. This will help maintain interest, encourage wider involvement across different areas of work, and ensure the group continues to benefit from both continuity and fresh perspectives.

Outputs will include:

- A co-designed annual Digital Critical Friends work plan.
- Regular Digital Critical Friends meetings and Town Hall sessions.
- Papers, summaries, and action notes that support informed contribution.
- Recruitment and onboarding materials for new members.
- Year-end feedback from Digital Critical Friends on whether their involvement felt meaningful.

G. Public Review and Co-Design Sessions

Some issues require more detailed public exploration than can be achieved through routine Digital Critical Friends meetings. These are topics where there are important questions about public expectations, trust, governance, communication, or emerging areas of research practice. Examples may include AI-enabled research, new data access models, transparency approaches, public benefit frameworks, or significant policy developments affecting the SDE.

During 2026/27, we will run a programme of focused public involvement deep dives, drawing on smaller groups of Digital Critical Friends and other relevant contributors where appropriate. These activities will be designed to generate richer insight on specific issues and provide evidence that can inform policy, communications, governance, and service development.

Each deep dive will be supported by a bespoke involvement plan, including background research, clear objectives, tailored briefing materials, facilitation plans, and defined outputs. Activities will be designed to ensure participants understand the issue being explored, the decisions being informed and how their input will be used.

Outputs will include:

- Up to five focused public involvement deep dives on priority policies, issues, or emerging areas.
- Briefing materials and facilitated involvement sessions tailored to each topic.
- Insight reports summarising findings, recommendations, and implications.
- Evidence of how insights have informed decisions, materials or policy development feeding into "You said, we did" reporting.

H. Targeted community engagement

The SDE needs to involve people beyond the Digital Critical Friends and formal involvement groups. Community involvement is not simply about gathering views; it is about creating opportunities for dialogue, shared understanding and meaningful contribution to decisions that affect how the SDE develops. This is particularly important where wider community insight can help shape priorities, improve public confidence, support the development of new initiatives, or where work affects specific patient groups, communities with relevant lived experience, underrepresented populations, or areas where trust and transparency are especially important.

During 2026/27, targeted community engagement will be linked to where public insight can genuinely influence a decision, programme, or area of development. So, activity will be focused on supporting research registries, sensitive research uses, or high-profile policy areas. Much of this work is likely to take place through programme-specific initiatives, such as registry-building programmes, with the SDE communications and involvement programme providing support and alignment where appropriate.

This work package focuses on gathering community insight where it can add value and ensuring that feedback is considered as the SDE develops.

Outputs will include:

- Targeted engagement activity for one or two priority topics where broader community insight is needed, e.g. through existing VCSE or partner networks.
- Plain-English discussion materials to support those conversations.
- Short summaries of key themes and insights gathered that feed into "you said, we did" reporting.

I. “You said, we did” reporting

People are more likely to stay involved when they can see that their contribution matters. Public contributors have also told us that trust is weakened when organisations ask for views but do not explain what happened next.

We will maintain a visible record of how public involvement has influenced the SDE. This will show what people told us, what changed as a result, and where something could not be changed and why.

Outputs will include:

- A “You said, we did” log covering public involvement activity.

- Public updates showing how feedback has shaped materials, policies, or decisions.
- Examples included in the Annual Report and public benefit reporting.

J. Support, inclusion and participation

Good involvement depends on making participation practical and fair. People need clear information, accessible meetings, appropriate support and fair recognition for the time and expertise they contribute.

We will continue to support public contributors so they can take part confidently and safely. This includes practical support for meetings, accessible papers, payment processes, and preparation for sessions where contributors are asked to review complex material.

Outputs will include:

- Accessible meeting papers and briefing materials.
- Induction and support materials for public contributors.
- Payment and expense processes for involvement activity.
- Training or briefing sessions where specialist topics require preparation.
- Reasonable adjustments to support participation in meetings, workshops, and reviews.

4.3 Public Benefit and Impact

Public benefit is ultimately what people want to see from the SDE. When we talk to patients, public contributors, and communities, they often ask the same questions: What is NHS data being used for? What research is happening? And how is that work making a difference for patients, local communities, and the NHS?

This pillar focuses on answering those questions in a clear and accessible way. It brings together evidence of the research the SDE supports, the outcomes it helps achieve, and the value it creates. By sharing case studies, research outputs, public involvement activity, and examples of impact, we can show not just what the SDE does, but why it matters.

K. Value capture and impact evidence

The SDE needs a clear and consistent way to record the benefits of the research it supports. Without this, information about impact can end up spread across research papers, project updates, reports, and conversations, making it nearly impossible to see the full picture of what the SDE has achieved.

During 2026/27, we will improve how we collect and organise information about impact and value. This will help us track what research has been supported, what data has been used, what results have been produced, and how this work has benefited patients, health services, researchers, and the NHS. Some of this information will later be used in case studies and public benefit stories, but the main purpose of this work is to collect, measure and bring together evidence of impact.

Outputs will include:

- A value capture methodology and supporting tracker for recording impact.
- Statistics to support public reporting and Annual Report content.

L. Research case studies and content development

People understand the SDE best when they can see real examples of the research it enables. Case studies help explain how NHS data, secure access and public oversight come together to support valuable research, while demonstrating benefits for patients, researchers, data partners, and the NHS.

During 2026/27, we will take a structured approach to capturing and communicating the impact of SDE-supported research. Rather than treating case studies, impact reporting, and stakeholder communications as separate activities, it establishes a single process for gathering evidence that can be reused across multiple outputs.

We will work with priority research leads and study teams to collect the stories, evidence and supporting material needed for communications, engagement, and reporting. Wherever possible, this will be done through a single structured conversation, reducing duplication for researchers while creating a consistent evidence base for future use.

The aim is to build a library of approved case studies, quotes, statistics, and impact evidence that can be adapted for different audiences and channels. This will improve consistency, reduce effort, and help ensure that the value of the SDE is communicated clearly and credibly.

Outputs will include:

- Describe the SDE's pipeline of studies and programmes for Digital Critical Friend review and case study development.
- Structured engagement with research leads and study teams to capture evidence and insights.
- A library of reusable case studies and supporting assets, including approved narratives, quotes, statistics, and impact evidence.

M. Annual Report

The Annual Report will remain the SDE's main public account of progress. It will build on the 2025/26 report by moving from explaining what has been set up to showing what the SDE is now delivering: the research supported, the data assets developed, the role of public involvement, and the benefits beginning to emerge for patients, communities, researchers and the NHS.

The report will bring together material from across this strategy, including transparency reporting, research case studies, publications, "You said, we did" evidence, and examples of value returned to the NHS. It should give public readers, and NHS system partners a clear, honest, and accessible account of what has changed during the year, what has been learnt, and where the SDE is going next.

Output will include:

- A 2026/27 Wessex SDE Annual Report.

N. Impact stories for the public and partner channels

Research case studies provide the evidence base for communicating benefits to patience, the public, researchers, and NHS system stakeholders. However, they are not the final products that most audiences will see. Once case study material has been developed and approved, it needs to be adapted into formats that work across different channels and audiences.

During 2026/27, we will turn case study evidence, impact information, and research outputs into a programme of public-facing content. The aim is to make public benefit visible through regular, accessible communications that can be shared through SDE, NHS, university, and partner channels.

Outputs will include:

- Website stories and impact updates based on approved case study material.

- LinkedIn posts, newsletter articles, and short-form content.
- Partner-channel copy for NHS, university, and research partners.
- Briefing material for stakeholder updates and presentations.
- Media-ready summaries where there is a strong public interest story.

4.4 Researcher, Partner, and System Engagement

The Wessex SDE can only deliver public benefit if researchers use it, data partners continue to contribute data, and NHS organisations support its development. Researchers need confidence that the SDE can help them deliver high-quality research. Data partners need confidence that participation is safe, worthwhile and delivering value for patients, communities, and back to them and the wider NHS.

Communications and CIE therefore have an enabling role, helping people understand what the SDE offers, the benefits it brings, how it works, and how it can support research.

This pillar focuses on providing the information, tools and evidence needed to support those conversations. It is not responsible for business development, researcher onboarding, or data partner management. Instead, it provides the communications and engagement infrastructure that helps those activities succeed.

O. Core narrative, messaging, and collateral suite

The SDE operates across a complex network of NHS organisations, universities, researchers, and partners. Consistent communication is important both for external understanding and internal alignment. Researchers, data partners, and system stakeholders should hear a clear and consistent explanation of what the SDE is, what it does and why it matters.

During 2026/27, we will refresh and maintain a core narrative, messaging framework and collateral suite that can be used across the SDE. This will provide shared language, agreed proof points and reusable materials that support conversations with researchers, partners, and stakeholders.

Outputs will include:

- A refreshed core narrative and messaging framework.
- A communications and marketing collateral suite.

- Standard PowerPoint presentation materials for use across the SDE and partner organisations.

P. Researcher information and support materials

Researchers need clear, practical information about how to work with the SDE. While a researcher toolkit already exists, it has developed over time and reflects the needs of different projects and programmes. As the SDE matures, there is an opportunity to bring greater structure and consistency to these resources.

This work mirrors the approach taken to patient information materials within the transparency programme. It will organise and develop researcher-facing information so that people can move easily from a basic understanding of the SDE offer through to more detailed guidance on governance, public benefit, communications, and reporting requirements.

The focus is not on creating guidance for its own sake, but on providing the information researchers need to work effectively with the SDE and meet the expectations of the wider organisation. This will be developed in collaboration with the wider SDE team and stakeholders.

Outputs will include:

- An updated researcher toolkit addressing priorities identified by the SDE team and stakeholders.

Q. Value return to data partners

NHS organisations contribute the data assets that make research possible. Maintaining their confidence is therefore essential to the long-term success of the SDE.

During 2026/27, we will support data partners by providing clear communications materials, sharing evidence of research impact and public benefit, and helping organisations understand the value created through their participation in the SDE.

Outputs will include:

- Communications materials for data partners.
- Case studies and public benefit evidence relevant to participating organisations.

- Feedback and insight to help understand data partner experience and perceived value.

R. Researcher and stakeholder insight

Understanding how researchers and stakeholders experience the SDE is essential to improving the service. Feedback provides evidence about what is working well, where barriers exist and where improvements should be prioritised.

During 2026/27, we will support a programme of structured feedback and insight gathering to help inform future service development and communications activity.

Outputs will include:

- Researcher and/or wider stakeholder surveys.
- Insight reports summarising key findings and areas for improvement.

S. National and system engagement

The Wessex SDE operates within a wider regional and national ecosystem. Sharing learning, contributing to common approaches, and helping shape emerging practice are all important parts of the SDE's role.

During 2026/27, we will continue to contribute to national and regional Communities of Practice and support communications and engagement activity linked to the Southern SDE Partnership and wider SDE Network.

This work helps ensure that learning is shared across the system and that Wessex continues to contribute to the development of national approaches where appropriate.

Outputs will include:

- Participation in relevant national Communities of Practice.
- Contributions to Southern SDE Partnership and wider SDE Network communications activity.
- Sharing learning and examples of good practice where relevant.

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5. Approach to Delivery

This strategy is delivered through a collaborative model that combines leadership from the Communications and CIE function with contributions from across the wider Wessex SDE team and its partners.

Communications and CIE is an enabling function. While it leads specialist communications, engagement, and public involvement activity, many of the outcomes described in this strategy can only be achieved through contributions from across the wider programme. Transparency depends on governance, information governance, data, and operational teams. Public benefit reporting depends on researchers and programme teams. Community involvement relies on subject matter experts and decision-makers being willing to engage directly with public contributors.

The delivery approach is built around four principles:

1. **Leadership and accountability**

   The Communications and CIE function is accountable to the Managing Director and represented within the SDE's leadership and governance arrangements. Strategic priorities are reviewed through the Senior Leadership Team and informed by public contributors, partner organisations and the wider SDE network.

2. **Shared ownership**

   Delivery is shared across the SDE. Communications and CIE provides leadership, coordination, and specialist expertise, while researchers, programme teams, governance functions, operational teams, and partner organisations contribute the knowledge, evidence and subject matter expertise needed to deliver the strategy.

3. **Partnership working**

   The strategy is delivered in collaboration with organisations across the Wessex research and innovation ecosystem. Key partners include Wessex Health Partners, participating NHS organisations, academic and research partners, the Southampton Centre for Research Engagement, and Impact (SCREI), the Southern SDE Partnership, and the wider NHS Research SDE Network.

   These relationships help ensure that communications, involvement, and public benefit activity reflect both local priorities and wider national developments.

4. **Public influence and scrutiny**

   Digital Critical Friends have reviewed and informed the development of this strategy and will continue to provide challenge and scrutiny as it is delivered.

This reflects a core principle of the Wessex SDE approach: public contributors should help shape how the SDE communicates, engages, and demonstrates public benefit, rather than simply reviewing decisions after they have been made. Public influence will continue to be demonstrated through Digital Critical Friends activity, targeted engagement, co-design activity and "You said, we did" reporting.

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6. Measuring Success

The success of this strategy will be judged by whether it helps the SDE maintain public trust, demonstrate public benefit, support meaningful public influence, and enable responsible growth.

Progress will be assessed through a combination of:

- transparency and public assurance reporting;
- feedback from Digital Critical Friends and wider community involvement and engagement activity;
- evidence of how public input has influenced decisions, policies and communications through our "You said, we did" reporting;
- evidence of public benefit and research impact;
- researcher, stakeholder, and partner feedback; and,
- annual review of the strategy and its priorities.

The SDE's Transparency Policy provides the primary framework for public reporting. Information relating to data use, public involvement, public benefit, governance, and service development will continue to be published through the website, transparency registers, Annual Report, and other public reporting mechanisms.

Alongside formal reporting, the SDE will continue to use public dialogue, community engagement and stakeholder feedback to understand whether its approach remains aligned with public expectations and the social licence values that underpin the programme.

This strategy will be reviewed annually to ensure it remains aligned with the SDE's mission, organisational objectives, public expectations, and the evolving research landscape.

Glossary

The Wessex SDE operates within a complex NHS, research and data environment, and some technical terms are difficult to avoid. This glossary explains the most important terms used in this strategy and provides a simple reference point for readers who are unfamiliar with the language of health data research.

Term	Meaning
Community Involvement and Engagement (CIE)	The ways in which Wessex SDE keeps people informed, involves them in decisions and helps them understand how NHS data is used for research. It includes public involvement, community engagement, transparency, public assurance, and communication about the benefits of research. Patient and Public Involvement and Engagement (PPIE) remains a core part of this approach.
Confidentiality Advisory Group (CAG)	An independent body that advises the Health Research Authority whether confidential patient information can be used for research without individual consent, subject to strict safeguards, public benefit, and regulatory oversight.
DAC	Data Access Committee. An independent committee that reviews requests to access data within the Wessex SDE and assesses whether proposed uses meet governance, legal, ethical, and public benefit requirements.
Data Capability Register (DCR)	A public record describing the data assets, datasets, and capabilities available through the Wessex SDE.
Data Use Register (DUR)	A public record of approved projects using data within the Wessex SDE, including information about the purpose of the research and expected public benefit.
Digital Critical Friends (DCF)	The Wessex SDE's standing public involvement group. Members are actively involved in the Wessex SDE's governance and scrutinising its activity.
HDR UK Gateway	A national catalogue of health datasets and research resources managed by Health Data Research UK, helping researchers discover available data and capabilities.
Health Data Research Service (HDRS)	The new national service intended to make it easier for approved researchers to discover, access and use health data safely across the UK.

HRA	Health Research Authority. The organisation that protects and promotes the interests of patients and the public in health and social care research in England.
Public benefit	The positive outcomes delivered through research, innovation or service improvement that benefit patients, services, or the wider NHS. Public benefit is one of the foundations of the Wessex SDE's social licence.
Researcher	A person carrying out approved research using data within the SDE. Researchers may come from approved NHS organisations, universities, charities, public sector organisations, or commercial organisations.
Section 251	A legal mechanism under the NHS Act 2006 that can allow confidential patient information to be used for approved research purposes without individual consent, subject to strict safeguards and oversight.
Secure Data Environment (SDE)	A secure computing environment that allows approved researchers to access and analyse health data without data leaving the secure platform. Researchers access the data securely and never see identifiable information about patients like names, addresses, or NHS numbers.
Social licence	The ongoing confidence and support of patients and the public for how NHS data is used. In Wessex, social licence is built through public benefit, transparency, involvement, accountability, and trust.
Southern SDE Partnership	A collaboration between Secure Data Environments in the south of England to share learning, align approaches and support greater interoperability across the network.
Transparency policy	The Wessex SDE policy that sets out how information about data use, governance, public involvement, and public benefit will be published and reported.
Wessex Health Partners (WHP)	The regional health and care innovation partnership that brings together NHS organisations, universities, and other partners across Wessex to improve health, care, research, and innovation.
Wessex Secure Data Environment (Wessex SDE)	The Secure Data Environment serving Hampshire, Dorset, and the Isle of Wight, providing approved researchers with secure access to NHS data for research that delivers public benefit.