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<b>Report to:</b>	Cabinet	<b>Date of Meeting:</b>	1 December 2016
<b>Subject:</b>	Sefton Integrated Sexual Health Service	<b>Wards Affected:</b>	(All Wards);
<b>Report of:</b>	Head of Health and Wellbeing		
<b>Is this a Key Decision?</b>	Yes	<b>Is it included in the Forward Plan?</b>	Yes
<b>Exempt/Confidential</b>	No		

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### Purpose/Summary

To report the key findings of the review of the Integrated Sexual Health Service in Sefton.

The current Integrated Sexual Health Service contract expires at the end of June 2017. A decision must be made by the end of December 2016, at the latest, on whether the contract extension clause will be activated or the Service re-procured. This will provide Southport and Ormskirk NHS Trust with the required minimum 6 months' notice period.

**Note:** When this service was originally procured, it was on the basis of a core contract period of 3 years with 2 further optional extension periods of 12 months. These are built in and anticipated at the outset, as part of the life of the contract, provided that the quality/price of services/goods provided under the contract are of a satisfactory standard and exercising the extension is considered to represent best value for the Council. The purpose of the extension(s) is to ensure that the quality of the contract is maintained throughout the life of the contract and to ensure that the Council, particularly at times of financial uncertainty, has flexibility to bring contracts to a conclusion and/or to be able to refine services and or goods received under the contract. The value of this contract requires the extension to be authorised through Cabinet.

### Recommendation(s)

To activate an extension clause within the existing contract for 12 months until 30th June 2018.

### How does the decision contribute to the Council's Corporate Objectives?

<u>Corporate Objective</u>		<u>Positive Impact</u>	<u>Neutral Impact</u>	<u>Negative Impact</u>
1	Creating a Learning Community	x		
2	Jobs and Prosperity	x		
3	Environmental Sustainability		x	

4	Health and Well-Being	x		
5	Children and Young People	x		
6	Creating Safe Communities	x		
7	Creating Inclusive Communities	x		
8	Improving the Quality of Council Services and Strengthening Local Democracy	x		

### Reasons for the Recommendation:

The contract was originally awarded for 3 years, from 1 July 2014, with the option to activate an extension clause for a further 12 months on two occasions (3+1+1).

This recommendation is for an activation of the contract extension clause for a twelve month period.

Key reasons for this recommendation are:

- Service provider performance has been consistently meeting or exceeding targets set by the commissioner.
- To avoid destabilisation of a high priority service through introducing uncertainty through re-procurement.
- To give the current provider the financial stability needed to further develop the fully integrated offer for all ages in the Bootle area.
- To allow better alignment of the Service with the outcome of the Council's forthcoming review of the medium term financial plan.

### Alternative Options Considered and Rejected:

To re-procure the Sexual Health Service with a contract start date of 1 July 2017, with delegated authority to the Health and Wellbeing Portfolio Holder to sign-off commissioning and re-procurement decisions.

Reasons for rejection of this option:

- Financial costs associated with re-procurement.
- Potential need for start-up costs if provider changed.
- Limited number of potential providers to tender.
- Potential negative impact on service users if current Service is destabilised through uncertainty of re-tendering.
- Impact on service users and key stakeholders of potentially changing provider.

### What will it cost and how will it be financed?

#### (A) Revenue Costs

There are no additional costs. The contract is being extended for a twelve month period during which the financial terms cannot be varied. The contract is agreed at the existing budget for 2016/17 of £ 2,299,900 per annum. Following this initial 12 month extension the Council have the option to grant a further 12 month extension. Any future decision to effect a further extension or to re-procure the service, will need to be made with consideration to the budget available at that time, following the forthcoming review of the Council's medium term financial plan .

**(B) Capital Costs**

There are no additional capital costs.

**Implications:**

The following implications of this proposal have been considered and where there are specific implications, these are set out below:

<b>Financial</b>		
<b>Legal</b>		
<b>Human Resources</b>		
<b>Equality</b>		
1.	No Equality Implication	<input type="checkbox"/>
2.	Equality Implications identified and mitigated	<input checked="" type="checkbox"/>
3.	Equality Implication identified and risk remains	<input type="checkbox"/>

**Impact of the Proposals on Service Delivery:**

Service delivery would continue as planned if the option to extend is selected. If re-procurement is preferred the mobilisation and implementation phase would ensure minimal impact on service users.

**What consultations have taken place on the proposals and when?**

The Head of Corporate Resources has been consulted and any comments have been incorporated into the report (FD 4385/16) and the Head of Regulation and Compliance (LD3668/16) has been consulted and any comments have been incorporated into the report.

The Public Health Commissioners have reviewed service performance, consulted with key partners in primary care, the council’s procurement team and from the Cheshire and Merseyside sexual health commissioners’ forum, as well as the service user and non-service user survey and consultation, completed by the provider, to inform the Cabinet decision on contract extension.

**Implementation Date for the Decision**

Following the expiry of the “call-in” period for the Minutes of the Cabinet Meeting

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**Background Papers:**  
None.

## 1. Introduction/Background

1.1 In line with Department of Health and Public Health England commissioning guidance (2015), Sefton Council commissions an integrated sexual health service across the Borough. This includes:

- **Contraceptive and sexual health** – including selection and delivery of a range of contraceptive methods.
- **Prevention, screening, diagnosis and treatment of sexually transmitted infections** (part of genitourinary medicine)
- **Health promotion** – including targeted work with, high-risk, vulnerable, and/or hard to reach groups within Sefton
- **Psychosexual counselling and erectile dysfunction services** (GP referral only)

The Integrated Sexual Health Service provides free, confidential services on a self-referral basis within the Borough and through healthcare professional referrals for residents of Sefton or people registered with a Sefton GP. The aim of this service is to improve access to services through providing community based 'one-stop shops' where the majority of sexual health and contraceptive needs can be met on-site.

Therefore, this service provides a single point of access to a wide range of screening, tests, treatments and interventions, and works in collaboration with the wider health service. Onward referrals and collaborative working practices with specialist services, such as the drugs and alcohol service, and the youth offending team, ensure that targeted provision to people at increased risk or vulnerability, are delivered.

An integrated sexual health service model, based on the Department of Health, national specification, was awarded to Southport and Ormskirk NHS Trust in July 2014. The contract was agreed for a three year period with the option to extend for a further period of up to two years.

A decision must be made by the end of December 2016 on whether the contract extension clause should be activated. This will provide Southport and Ormskirk NHS Trust with the minimum 6 months' notice period. As such the public health commissioners have reviewed service performance, consulted with key partners in primary care, the council's procurement team and from the Cheshire and Merseyside sexual health commissioners' forum, as well as the service user and non-service user survey and consultation, completed by the provider, to inform the cabinet decision on contract extension.

This service is contracted to provide a range of specialist interventions against which performance is regularly monitored. Interventions include:

- Pregnancy testing
- Full sexual health history taking and risk assessment
- Supply of condoms
- Supply of emergency contraceptives – including oral emergency contraceptives and intrauterine device fitting for emergency contraceptive purposes.
- First prescription and continuing supply of a full range of hormonal contraceptive methods
- Supply, insertion, follow-up, and removal of intra-uterine devices and hormonal implants.

- STI testing and treatment including complex cases such as those involving, pregnant women, with interface to specialist areas such as specialist HIV care.
- Post exposure prophylaxis and testing after high risk sexual exposures.
- Targeted outreach and health-promotion work with groups at higher-risk of STIs and unplanned pregnancy, as well as with residents who may face barriers to accessing services.

The service currently operates from four main sites across Sefton, these are:

- The May Logan Centre - Bootle
- Southport Centre for Health and Wellbeing - Southport
- Netherton Health Centre - Netherton
- Maghull Health Centre - Maghull

Collectively these services offer a range of times and days, for appointments or drop-in clinics, with some clinics offering dedicated sessions for those aged under 25 years.

Recently, the Pregnancy Advice and Contraceptive Education (PACE) clinic, providing a range of clinics, including provision for people aged under 25, was displaced from its base in Bootle Health Centre. In response to this clinic closure, there has been an increase in provision at the May Logan Centre, which now delivers clinics for all ages, including specialist priority provision for those aged under 25s.

In addition to the Integrated Sexual Health Service, the Council also commissions Primary Care Long Acting Reversible Contraceptives (LARC), this service complements the existing LARC provision within the Integrated Sexual Health Service. This service was reviewed in 2015, with a recommendation to continue provision. Ideally, this provision would be consolidated within the core service. This will be explored in the future.

## **1.2 Approach Adopted and Key Elements of the Service Review**

The Sexual Health Service Review considered the following areas:

- The background, policy and guidance around integrated sexual health services
- A description of the current service
- Review of performance
- Recommendations

The performance of the sexual health service has been measured against the agreed service specification performance indicators. This has been considered within the context of national and local indicators relating to sexual health, such as teenage conception rates.

Complaints and compliments made by service users and other stakeholders are regularly reviewed. The Service Provider has also undertaken a service user and non-service user consultation about the Integrated Sexual Health Service. Additionally, the Care Quality Commission rated this Service as 'good' following the most recent inspection in 2015.

Partnership working and the development of new service pathways are monitored at quarterly performance meetings and emerging patterns and trends are identified through the Sefton Sexual Health Integrated Partnership meetings.

### 1.3 Other considerations include:

- Market of alternative providers – there is a limited pool of potential providers.
- An extension period may provide greater stability within the sexual health system. Enhancing provider commitment to continued service development.
- Financial cost of re-commissioning. A new provider is likely to require start-up costs which would add to the 17/18 budget.
- Impact on clients, provider and other stakeholders of changing provider.
- The public health commissioners consider this service to offer good value. A recent benchmarking exercise comparing both local and national cost per head of population found the Sefton service to be at a lower cost per head compared to the National average. Any further reduction in funding for this service may result in compromised quality.

## 2.0 Key Findings

Commissioners monitor performance against the performance indicators agreed in the service specification these include:

- Activity data across clinical sites.
- **Diagnostic tests offered and performed for chlamydia** – percentage of 15-24 year olds screened is above target set and above National average.
- **Hepatitis B&C testing, diagnosis and hepatitis B vaccinations given** – percentage of service users offered Hepatitis testing above target set.
- **HIV testing and diagnosis including late diagnosis**- percentage of service users offered HIV testing above target set. Late diagnosis remains a priority locally, and across the North West region, and the provider is working with the Public Health commissioners and local partners to develop pathways leading to earlier HIV diagnosis.
- Health promotion activities and outreach.
- **Emergency contraceptives delivery and teenage pregnancy rates** - Sefton uptake of contraceptives is similar the North West regional average, but higher than the National average, this contributes to a teenage pregnancy rate in Sefton significantly lower than the North West regional average.
- **Long acting reversible contraceptives** – percentage of contraceptives that are long-acting reversible (including injections) similar to National average and above North-West average.

Performance has been deemed either meeting or exceeding targets set, by the commissioners, and the provider has been fully engaged in seeking to improve outcomes and to develop services and performance monitoring methodologies. In support of this, the Care Quality Commission (CQC) inspected this service in 2015, as part of the community health services for children, young people and families at Southport and Ormskirk NHS Trust, and rated it as 'good'.

## 3.0 Conclusions

Officers are satisfied that the current integrated sexual health service is fit for purpose and is providing good performance against agreed performance indicators. Therefore, officers recommend that the extension clause within the existing contract be activated for 12 months until 30 June 2018.