

Report to:	Cabinet	Date of Meeting:	27 July 2017
Subject:	Sefton Integrated Sexual Health Service		
Report of:	Head of Health and Wellbeing	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Health and Wellbeing		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

The Integrated Sexual Health Service is currently provided by Southport and Ormskirk NHS Trust. Following Cabinet approval, in December 2016, the first contract extension clause was activated. Therefore the current Integrated Sexual Health Service in Sefton contract expires on 30 June 2018. This report outlines three options available at the end of this contract period.

The available options are:

1. To reprocur the service collaboratively with Knowsley Council.
2. To reprocur the service without entering into a formal collaboration with Knowsley Council.
3. To activate the contract extension clause for 12 months from 1 July 2018 until 30 June 2019.

Recommendation(s):

1. To seek permission to move to a formal procurement process in collaboration with Knowsley Council who will be the lead organisation.
2. To give delegated authority to the Director of Public Health in consultation with the Cabinet Member for Health and Wellbeing to evaluate the options and to award the contract, following the procurement process.

Reasons for the Recommendation(s):

- A joint procurement and commissioning arrangement for the Integrated Sexual Health Service has potential to provide efficiencies around procurement and contract management activities for the Council.
- The commissioning model is currently being developed, and through innovation is looking at ways of procuring a better service.
- The larger footprint and financial resource provides the opportunity for innovation within this area, leading to an improved offer across the two Boroughs
- A collaborative model could improve choice and quality of service for local residents, allowing them to access a wider range of services.

Reprocurement of the Service without entering into a formal collaboration with Knowsley

- Will not provide an opportunity for efficiencies around procurement and contract management activities.
- Will not provide sufficient financial resources to allow innovation to develop.

Alternative Options Considered and Rejected: (including any Risk Implications) Activate a further 12 month extension option

- Will not address issues related to accommodation and provision for young people.
- Will not enable the integration of primary care long acting reversible contraceptives and cervical screening into the service.
- Will not enable the Royal Liverpool University Genuo-urinary medicine cross-charging to be integrated into the service.

What will it cost and how will it be financed?

(A) Revenue Costs

The service will be financed through budgets currently allocated to sexual health. Currently this budget is £2,719,600. This represents the combined budgets for the following elements:

- Integrated Sexual Health Service
- GP LARC
- Tariff based charges from Royal Liverpool University Hospital Genuo-Urinary Medicine Services for Sefton residents.

Although there will be efficiencies around procurement and contract management activities due to collaborative working, it is not anticipated that there will be a saving when the service is reprocured as the current budget already reflects a high level of cost-effectiveness. This is evidenced through a recent benchmarking exercise which identified 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 for Sefton residents, and would negatively impact on health and wellbeing outcomes.

(B) Capital Costs

There are no capital costs for the Council associated with this Service.

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):
The proposals aim to offer maximum value for money. There will be efficiencies around the commissioning and procurement process due to collaborative working arrangements.
Legal Implications:
The proposed procurement must follow the procedures within the Public Contracts Regulations 2015, as amended.
Equality Implications:
The equality implications have been identified and will be mitigated through completion of an equity impact assessment and through development of a consultation and engagement plan and report, which will be overseen by the consultation and engagement panel.

Contribution to the Council's Core Purpose:

Protect the most vulnerable: Reprocurement of this service provides an opportunity to ensure that sexual health provision for the most vulnerable is optimised.
Facilitate confident and resilient communities: Not applicable
Commission, broker and provide core services: Commissioning of sexual health services is a statutory responsibility of the Council
Place – leadership and influencer: Not applicable
Drivers of change and reform: Reprocurement of this service offers an opportunity for innovation.
Facilitate sustainable economic prosperity: Not applicable
Greater income for social investment: Not applicable
Cleaner Greener Not applicable

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD 4750/17) and Head of Regulation and Compliance (LD 4034/17) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

No formal external consultations have yet taken place, however stakeholder, and public consultations and engagement will form part of the service specification development process.

Implementation Date for the Decision

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

Contact Officer:	Charlotte Smith
Telephone Number:	
Email Address:	charlotte.smith@sefton.gov.uk

Appendices:

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)
- 1.2 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.
- 1.3 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.
- 1.4 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.
- 1.5 Southport and Ormskirk NHS Trust were awarded a three year contract with an option for two twelve month extensions (3+1+1). Following Cabinet approval, in December 2016, the first contract extension clause was activated. Therefore the current Integrated Sexual Health Service in Sefton contract expires on 30 June 2018. There remains an option to offer a further 12 months, from 1 July to 30th June 2019, following which the Service must be re-procured.
- 1.6 The Service has continued to meet all key performance indicator targets since award, however there are a number of challenges related to Service provision which remain unresolved and are outlined below:

2. Offer to young people

- 2.1 In October 2016 the Service was displaced from its premises in Bootle Health Centre. This location previously offered a range of clinic sessions including provision aimed at people aged under 25. In response to this clinic closure, clinic provision at May Logan was increased and sessions which had previously been for people aged over 25 years, became open to all age groups, There are also a number of evening sessions for young people.

- 2.2 The number of young people, aged under 25 accessing the May Logan clinic sessions has been monitored by the service. They have reported that the number of young people accessing the service has fallen since the closure of the Bootle Health Centre clinics. This reduction in attendance has continued despite steps to promote the under 25 only clinics at the May Logan Centre and is particularly noticeable for those aged under 18 years.
- 2.3 The Service is currently exploring a range of options for accommodation to improve the provision in the Bootle area for all ages, including provision for younger people. However, all options considered by the provider will incur rental and/or set-up costs, and may require a minimum rental period beyond the length of the current contract.
- 2.4 Therefore reprocurement of this Service provides an opportunity to ensure the offer for young people across the Borough is strengthened and will provide the necessary contract length to allow any commitments required in terms of leasing and/or set-up costs to be covered through the financial envelope provided.

2.1 Cervical Screening

The Service is not commissioned to provide cervical screening and currently only offer opportunistic cervical screening within the service. NHS England currently commission General Practices to deliver cervical screening as part of the core contract. NHS England, as commissioners of the Cervical Screening Service recently undertook some insight work which highlighted the need to offer choice to women regarding the setting for cervical screening. NHS England have agreed in principle to fund some cervical screening within the sexual health clinic setting (around 10%), providing local women with choice.

This provision could be built into a new model of service delivery when the Service is reprocured, and a new service specification developed.

2.2 Genito-Urinary Medicine Royal Liverpool University Hospital

Within genito-Urinary Medicine (GUM) a national open access policy gives rise to cross-charging, when residents access out of area GUM clinics. Currently the Local Authority funds genito-urinary medicine (GUM) appointments at the Royal Liverpool University Hospital for residents of Sefton on a tariff based system. Re-procurement of this Service provides an opportunity to align this element of cross-charging into the new Service, and ensures continued choice for Sefton residents.

2.3 Primary Care Long Acting Reversible Contraceptives(LARC)

Currently a small number of General Practices in Sefton are individually commissioned on a tariff basis to deliver long acting reversible contraceptives to women in Sefton; this provides choice to women in Sefton. Currently most LARC is delivered within a Sexual health clinic setting. Re-procurement of this Service would provide an opportunity to move this element into the sexual health model, allowing the provision of Primary Care LARC to be developed with the support of the core service.

3 Collaborative Commissioning Across Sefton and Knowsley

Knowsley are recommissioning Sexual Health Services with a mobilisation date of 1st April 2018.

Commissioning in collaboration with Knowsley represents an opportunity to jointly commission the two sexual health services. There are a number of advantages to a collaborative commissioning process. These include efficiencies around the procurement and commissioning processes and alignment of performance frameworks to facilitate benchmarking across the two areas. Collaborative development of service models and specifications enables sharing of knowledge and best practice with the aim of improving the offer to residents across the two Boroughs.

Through consultation and engagement across Sefton, a service model which meets the needs of Sefton residents including those aged under 25 will be developed. This will support progress against Public Health Outcomes Framework (PHOF) indicators, which include:

- **Under-18 conceptions** - The latest data available from 2015 shows that Sefton has a similar rate of conceptions in under 18s to the England average. It is core aim of the Service to reduce unplanned and teenage pregnancies, this in turn will reduce the number of young people undergoing terminations of pregnancy, and support improved life chances for young people in the Borough.
- **Chlamydia diagnoses (15–24-year-olds)** –The latest data available from 2016 shows that Sefton is performing well and achieving the benchmark level of detection in this age group. Early identification of chlamydia reduce the long term complications associated with this infection and reduces the likelihood of ongoing spread of the infection among young people in Sefton.
- **People presenting with HIV at a late stage of infection** - The latest data available from 2013-2015 shows that in Sefton, around half of all new diagnosis of HIV infection are at a late stage of infection. This is similar to the England and Regional average. Earlier diagnosis increases the effectiveness of treatments for HIV and helps reduce onward transmission.