

Agenda Item 18.

TITLE:	Sexual Health Services Recommissioning
FOR CONSIDERATION BY	Health Overview and Scrutiny Committee on 28 July 2015
WARD	None Specific
DIRECTOR	Stuart Rowbotham, Director of Health and Wellbeing

OUTCOME / BENEFITS TO THE COMMUNITY

The recent re-commissioning of sexual health services in the West of Berkshire aimed to improve sexual health services for the residents of Wokingham Borough and deliver quality services in line with the latest developments in best evidence-based practice, choice and safeguarding and providing good value for money.

During 2013-14 the existing services were scrutinised and a comprehensive needs assessment undertaken across Berkshire. After full consideration of service provision and value for money the three local authorities in the West of Berkshire - Wokingham, Reading and West Berkshire commenced a procurement and recommissioning process.

The new service aims to deliver the following outcomes to improve the sexual health in the local population. The objectives of the service to deliver this vision are for:

- Clear accessible and up to date information about services providing contraception and sexual health for the whole population including information targeted at those at highest risk of sexual ill health
- Improved access to services among those at highest risk of sexual ill health
- Reduced sexual health inequalities amongst young people and young adults
- Reduced sexual health inequalities amongst BME (Black, Minority and Ethnic) groups
- Reduced sexual health inequalities among people with physical and/or mental impairment
- Increased uptake of effective methods of contraception, including rapid access to the full range of contraceptive methods including LARC (Long Acting Reversible Contraceptive) for all age groups
- A reduction in unwanted pregnancies in all ages as evidenced by teenage conception and abortion rates
- Increased early diagnosis and effective management of sexually transmitted infections with a long term reduction in sexual health infections in the populations
- Increased uptake of HIV testing with particular emphasis on first time service users and repeat testing of those that remain at risk
- Increased development of evidence-based practice

RECOMMENDATION

To allow HOSC to consider the process and outcomes of the re-procurement and recommissioning process, and to be aware of the rationale for the re-tendering, benefits achieved and reduction in overall costs.

SUMMARY OF REPORT

This report gives an overview of the recent tendering process for sexual health services in Wokingham. On 1st April 2015 following on from a rigorous tendering process a new three year contract, which was awarded to Royal Berkshire Hospitals Foundation Trust, came into effect.

From the 1st April 2013, with the transfer of public health responsibilities to top-tier local authorities as per the 2012 Health and Social Care Act, Wokingham Borough Council has been mandated to commission comprehensive open access sexual health services (including free Sexually Transmitted Infections (STI) testing and treatment, notification of sexual partners of infected persons and free provision of contraception).

Sexual health services represent a significant proportion of the spend of the public health ring-fenced grant, and effects a range of Public Health Outcome Framework (PHOF) outcomes, including:

- Under 18 conceptions
- Chlamydia diagnosis in the 15-24 age group, and
- Late diagnosis of HIV

The following sexual health services are not the commissioning responsibility of local authorities, and were thus excluded from this process:

- Termination of pregnancy services which are commissioned by the CCGs
- HIV treatment and care is commissioned by NHS England.
- Most GPs offer standard contraception services as part of their GMS or PMS contracts and this is commissioned by the NHS Commissioning Board and is not part of the public health responsibility.

Whilst not the responsibility of local authorities; joined-up sexual health provision requires close collaboration between the authorities and the providers and commissioners of these services.

Local Authorities are responsible for ensuring their residents have open access to sexual health services which include:

- Contraceptive services
- Treating, testing and caring for people with sexually transmitted infections (STIs)
- Notifying partners of people with such infections so that they themselves may seek treatment
- Services to be available to all people present in the local authority area
- Advice on and access to a broad range of contraceptive substances and appliances
- Advice on preventing unwanted pregnancies.

Under the Venereal Diseases Act 1974, patients can access any sexual health clinic in the UK regardless of area of residence and can do so anonymously if desired. The provider Trusts, if given sufficient information by the patient, can then invoice the local authority of resident of the patient. Being close to London and with a mobile local population including many students away from home at higher education institutions; Wokingham Borough Council have received invoices from some 37 providers or Trusts across the country. In 2014/15 WBC paid a total of £39,748 for such out of area sexual health services.

Background

National/Local Context and Evidence Base

Sexual health is an important area of public health. Most of the adult population of England are sexually active and access to quality sexual health services improves the health and wellbeing of both individuals and populations. The Government has set out its ambitions for improving sexual health in its publication, *A Framework for Sexual Health Improvement in England (2013)*.

Sexual ill health is not equally distributed within the population. Strong links exist between deprivation and STIs, teenage conceptions and abortions, with the highest burden borne by women, men who have sex with men (MSM), teenagers, young adults and black and minority ethnic groups. Similarly HIV infection in the UK disproportionately affects MSM and Black Africans in the UK. Some groups at higher risk of poor sexual health face stigma and discrimination, which can influence their ability to access services. This is especially the case for many people with physical or mental impairments, frequently perceived as asexual, and whose sexual health and relationship needs are often ignored.

An integrated sexual health service model aims to improve sexual health by providing easy access to services through open access 'one stop shops', where the majority of sexual health and contraceptive needs can be met at one site, usually by one health professional, in services with extended opening hours and accessible locations.

The provision of integrated sexual health services is supported by current accredited training programmes and guidance from relevant professional bodies including Faculty of Sexual and Reproductive Health (FSRH), British Association for Sexual Health and HIV (BASHH), British HIV Association (BHIVA), Medical Foundation for HIV and Sexual Health (MEDFASH), Royal College of Obstetricians and Gynaecologists (RCOG) and National Institute for Health and Care Excellence (NICE) and relevant national policy and guidance issued by the Department of Health and Public Health England. Providers must ensure commissioned services are in accordance with this evidence base.

The Public Health White Paper *Healthy Lives, Healthy People: Our Strategy for Public Health in England*¹ highlights a commitment to work towards an integrated model of service delivery to allow easy access to confidential, non-judgemental sexual health services (including for sexually transmitted infections (STIs), contraception, abortion, health promotion and prevention).

The new service is characterised by 'hub-and-spoke' working with a level 3 base at the Florey Clinic in Royal Berkshire Hospital with a local 'spoke' service provision at Wokingham Hospital which reflects local need.

Analysis of Issues

Needs assessment and services review

A series of local stakeholder events were held across Berkshire in January and February 2014 to feedback the findings of the sexual health needs assessment. The stakeholder events helped to determine local priorities and services and were enhanced by a final pan-Berkshire event aimed specifically for representatives of vulnerable groups. The outcome of which fed into the service specification. The table below provides a breakdown of participants by each authority.

Local Authority	No. participants
Slough	29
Bracknell Forest	34
Reading	30
West Berkshire	31
RBWM	39
Wokingham	37
Berkshire Wide	45

The range of attendees included representatives from:

- Health Watch
- CCG GP's
- Thames Valley Police
- Local councillors from the Overview and Scrutiny Committee, other members
- External providers BHFT GUM consultant, BHFT Programme Manager, Thames Valley Positive Support, Boots pharmacy, Lloyds pharmacy, BPAS. Frimley Park Hospital GUM Consultant, Virgin Health
- Council stakeholders were - CYP team, YOS manager, DAAT team leader, Head of Early intervention and prevention manager, Youth Services sexual health leads, CYP commissioning managers, representatives from secondary schools,
- Health stakeholders School Nurses, Health Visitors and Health Visitor manager, Learning Disability lead nurse
- Council officers –policy, performance, community.
- Public health consultants and sexual health leads

Financial Modelling

The financial and service options modelling exercise tested future costs through procurement. Following the presentation of the modelling to the Public Health Advisory Board on the 8th April, Slough and Bracknell agreed to stay with their current provider, Berkshire Healthcare Foundation Trust (BHFT). The Royal Borough of Windsor and Maidenhead felt that they should test the market to consider their options and agreed to enter into the tendering process in partnership with the West of Berkshire local authorities. After tenders were received; they decided to pull out of the procurement exercise, leaving the three West of Berkshire local authorities to complete the process.

Future and Current Developments

Chlamydia screening was excluded from the tender process. This was because BHFT, who run the service in the East as well as the West under two separate contracts, agreed to introduce Dual Testing for Chlamydia and Gonorrhoea throughout the county at no extra cost within the current financial year. This will be reviewed with a view to standardising the service contract across the County. A business case will be developed for the commissioners to consider any financial impact of this standardisation.

Following on from the Needs Assessment undertaken in 2014, a new IT platform and website are being developed across Berkshire which will provide information for all Berkshire residents and will bring together all sexual health related services, including advice on child sexual exploitation, as a one stop shop.

There are a number of services that are commissioned outside of the main sexual health contract, including HIV support service, condom distribution for young people, and sexual health support services for children and young people. In partnership with colleagues in Reading and West Berkshire as well as provider services across all areas of sexual health, the Wokingham Public Health Team support a Berkshire West Sexual Health Network to co-ordinate all services with the aim of building efficiencies within each of the commissioned services as well as ensuring that services work for the benefit of residents.

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

The Council faces severe financial challenges over the coming years as a result of the austerity measures implemented by the Government and subsequent reductions to public sector funding. It is estimated that Wokingham Borough Council will be required to make budget reductions in excess of £20m over the next three years and all Executive decisions should be made in this context.

Funding Model:

The new service has been contracted on a three year maximum and minimum block basis (with an option to extend for a further two years) which means that activity levels will only impact on the cost between an agreed maximum and minimum annual cost. The previous service was wholly priced on activity, with Wokingham Borough Council paying the full national tariff for each activity. This new contract ensures a locally agreed price which gives the Borough substantial savings (please see chart below).

	Estimated Spend 14/15	assumed Yr 1	Cap & collar restrictions		Estimated Savings	Max saving	Min Saving
			Maximum spend	Minimum Spend			
Year 1	£795,460	£598,541	£618,870	£578,212	£196,919	£217,248	£176,590
Year 2	£795,460	£597,938	N/A	N/A	£197,522	N/A	N/A
Year 2	£795,460	£597,133	N/A	N/A	£198,327	N/A	N/A

Summary	Over 3 year expected savings	Total cost at 14/15 prices	Estimated costs new prices	Percentage savings
Years 1-3	£592,768	£2,386,380	£1,793,612	24.8%

From 2016/17 onwards, there will be a 5% top sliced off the sums for GUM activity & Family Planning activity. These sums will be ring-fenced and have to be earned by the provider on completion of an agreed Quality Premium thereby offering the commissioner a quality bonus for service excellence without impacting our budget.

List of Background Papers

DH(2013) Commissioning sexual health services and interventions; Sexual health best practice guidance for local authorities available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/144184/Sexual_Health_best_practice_guidance_for_local_authorities_with_IRB.pdf

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