

# **Title of report: Commissioning of the Herefordshire integrated sexual health service**

**Decision maker: Cabinet Member Community Wellbeing**

**Decision date: Friday 10 February 2023**

**Report by: Senior Commissioner Public Health**

## **Classification**

Open

## **Decision type**

### **Key**

This is a key decision because it is likely to result in the council incurring expenditure which is, or the making of savings which are, significant having regard to the council's budget for the service or function concerned. A threshold of £500,000 is regarded as significant.

This is a key decision because it is likely to be significant having regard to: the strategic nature of the decision; and / or whether the outcome will have an impact, for better or worse, on the amenity of the community or quality of service provided by the authority to a significant number of people living or working in the locality (two or more wards) affected.

Notice has been served in accordance with Part 3, Section 9 (Publicity in Connection with Key Decisions) of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

## **Wards affected**

(All Wards);

## **Purpose**

This report is seeking approval for the re-commissioning of an integrated sexual health service for adults and young people resident within the county of Herefordshire. The report

sets out the key information relating to the current service provision and the ambitions for the recommissioned service to commence on 1 April 2024. Recommendation(s)

## **Recommendations**

**That;**

- a) Cabinet member agrees to continue to commission an integrated sexual health service for Herefordshire for a 5 plus 2 year term through a formal procurement process with an indicative budget not exceeding £7,829,500 (7 years);**
- b) Subject to the completion of a competitive tendering process, authority to award a contract for an integrated sexual health service for a 5 plus 2 year term and all operational decisions is delegated to the Director of Public Health/Director Community Wellbeing.**

## **Alternative options**

1. Do nothing and allow the contract to expire at the end of the contract period of 31 March 2024. This option is not recommended due to the detrimental impact this would have on managing population health protection and the wider impact on primary and secondary care providers.
2. Extend the current contract with the existing provider. This is not recommended, as the current contract is reaching its contractual end date of 31 March 2024 following a 5 year term. The local authority has a legal responsibility under the procurement regulations for the public procurement of services.

## **Key considerations**

3. Councils have, since 1 April 2013, been responsible for improving the health of their local population and for commissioning the range of public health services transferred to them from the NHS by the Health and Social Care Act 2012. This includes provision of services to improve sexual health. While commissioners are able to make decisions about provision based on local need, there are also specific legal requirements ensuring the provision of certain services as set out in the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013.
4. The service falls within the implementation of the council's adult wellbeing blueprint for developing self-care and building community resilience within healthier communities under a strategic preventative approach.
5. Sexual health is an important and wide ranging area of public health. Most of the adult population of England are sexually active, and having the correct sexual health

interventions and services can have a positive effect on population health and wellbeing as well as individuals at risk.

- a) The Public Health Outcomes Framework contains three specific indicators for sexual health which the service will support:
  - b) Under 18s conceptions
  - c) Chlamydia diagnosis in the 15-24 year age group
  - d) Late diagnosis of HIV
6. The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 require local authorities to arrange for the provision of certain services which cover the provision of sexual health services. These are the provision of:-open access sexual health services for everyone present in their area; covering sexually transmitted infections (STI) testing and treatment, and notification of sexual partners of infected persons; and free contraception, and reasonable access to all methods of contraception.
  7. The current contract for delivering sexual health services in Herefordshire ends on 31 March 2024. Under procurement regulations it is necessary to tender a new countywide prevention focussed integrated sexual health service incorporating, open access provision of sexual health services for all people who have sexual health and contraception needs in Herefordshire County. The service will be recommissioned using the current national public health specification, tailored to meet the needs of Herefordshire's population and demographics following consultation and a needs assessment.
  8. A tender process will be completed in line with the Council's Contract Procedure Rules and Public Contracts Regulations 2015 (PCR2015). The tender process will commence late spring 2023 with commencement of the new service due on 1 April 2024. The tender will be advertised as a 5 plus 2 year contract. The service will be procured under a single contract to be delivered by a lead provider. The lead provider will be required to work in partnership with or sub contract to other organisations with relevant expertise to deliver services throughout the community that reduce health inequalities relating to vulnerable adults and young people including looked after children, minority ethnic groups and sex workers. The service will also seek to target vulnerable and high-risk populations working towards better provision of key services in in community settings.

## **Community impact**

9. The service will be equitable and accessible across the county. Outreach and innovative opportunities will be made available for individuals who cannot attend a service location. The service has the potential to reduce demand on acute and intensive services within the health and social care system, in particular with regard to presentation at A&E and primary care/GP practices. The services will help meet the

council's corporate objectives of enabling residents to live safe, healthy, independent lives and securing better services, quality of life and value for money.

10. The service falls within the implementation of the council's county plan and associated blueprint for developing self-care and building community resilience within healthier communities under a strategic preventative approach. The proposal is not anticipated to negatively affect the achievement of the county plan or health and wellbeing priorities. The proposal has no negative impact on looked after children or the council's parenting role. If these services are not provided, there would be a considerable impact on the health and wellbeing of those currently supported and their families. The impact on A&E departments, primary care/GP practices and mental health services without this provision, would be significant, resulting in higher system costs.

## **Environmental Impact**

11. Herefordshire Council provides and purchases a wide range of services for the people of Herefordshire. Together with partner organisations in the private, public and voluntary sectors. We share a strong commitment to improving our environmental sustainability, achieving carbon neutrality and to protect and enhance Herefordshire's outstanding natural environment. The environmental impact of this proposal has been considered through the service specification and includes appropriate requirements on the contractor/delivery partner to minimise waste, reduce energy and carbon emissions and to consider opportunities to enhance the biodiversity. This will be managed and reported through the ongoing contract management.

## **Equality duty**

12. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to –

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

13. This service works with some vulnerable individuals, many of whom will share a Protected characteristic. This report supports the council in delivering its equality duty by ensuring that the service offered can fulfil the three aims of the equality duty as

stated above. A continually improving service will have a significant positive impact on the sexual health outcomes for the individuals accessing the service.

14. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. An Equality Impact Assessment is attached to this report.

## Resource implications

15. The current budget for the service is £1,118,500 per year. There have been no increases to the budget since it was commissioned in 2018.
16. The cost of this service has been held at the same level for the past 5 years by allowing no inflationary increases within the contract.
17. There are no proposed increases to the budget for the new service either which will be contained to a maximum amount of £1,118,500 per year.
18. This service is a mandated service and funded through the Public Health Ringfenced Grant.

Revenue Budget Forecast	2024/5 Yr1	2025/6 Yr 2	2026/7 Yr 3	2027/8 Yr 4	2028/9 Yr 5	2029/30 Yr 6	2030/31 Yr 7
The Public Health Grant	£1,118,500	£1,118,500	£1,118,500	£1,118,500	£1,118,500	£1,118,500	£1,118,500
TOTAL							£7,829,500

## Legal implications

19. Local authorities' statutory responsibilities for public health services are set out in the Health and Social Care Act 2012. Local authorities have had a duty to take such steps as they consider appropriate for improving the health of the people in their areas.
20. The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 require local authorities to arrange for the provision of certain services which cover the provision of sexual health services. These are the provision of:-open access sexual health services for everyone present in their area; covering sexually transmitted infections (STI) testing and treatment, and notification of sexual partners of infected persons; and free contraception, and reasonable access to all methods of contraception.

21. The whole life value of this contract (including the option to extend) is estimated at £7,829,500. In letting contracts over a certain value the council is required to comply with the Council's Contract Procedure Rules and Public Contracts Regulations 2015 (the 2015 Regulations)
22. Regulation 5(1)(d) of the 2015 Regulations provides that public service contracts for social other specific services listed in Schedule 3 of the 2015 Regulations must be let in accordance with the 2015 Regulations when the whole life value of the contract is equivalent to or more than £663,540 (inclusive of VAT)

### **Risk management**

23. The key risk of not re-commissioning sexual health services is an ending to service provision resulting in a heavily increased demand on primary and secondary care services. The ending of the service would remove vital health protection services such as contraception and identification of STIs. The integrated service will work alongside primary care services, drug & alcohol services, rape crisis services and Public Health Nursing services supporting vulnerable young people and those on the edge of care services attempting to reduce the number of looked after children in the county through health prevention.
24. There is a risk in not increasing the budget which could result in more challenge in securing specialist sexual health staff.
25. A full competitive procurement exercise will be carried out with completion expected in the autumn 2023, allowing at least 6 months for service mobilisation following contract award. The market for sexual health service provision is competitive with large NHS trusts with experience of service delivery potentially interested.

<b>Risk / opportunity Example</b>	<b>Mitigation</b>
No increase to budget since it was last commissioned in 2018 to account for inflation and cost of living	The service specification will need to allow for innovative ways of working which may include more on line consultations and testing options.
Securing specialist sexual health staff	The provider will need to ensure a good skill mix, investing and supporting more in health care assistants that can be trained to do more back office functions.
Budget restrictions may limit the ability to offer in person face to face outreach opportunities	Outreach opportunities could be offered through on line consultations and opportunities and closer working links with pharmacies and GPs.  Quarterly monitoring of the contract and KPI's to ensure service is being delivered.

26. The risks will be managed at a service level and monitored at quarterly contract meetings. Any significant risks will be reported to the director and placed on the relevant risk registrar.

### **Consultees**

27. An on line consultation questionnaire was launched in October 2022 and runs until February 2023. Paper copies of the questionnaire are also made available to patients accessing the sexual health clinic.
28. Face to face consultation is planned for January 2023 at the sexual health service, targeting the young person's clinic.
29. Stakeholder consultation is due to take place in January which will help inform service redesign and identify any gaps. Feedback from the consultation process will be reviewed and fed into the service redesign phase.
30. All consultation results will be fed into the sexual health needs assessment. Once completed, this document will be made public.
31. Views were sought from political groups and the balance of opinion was in favour of the recommendations.

## Appendices

Equality Impact Assessment

### Report Reviewers Used for appraising this report:

Governance	John Coleman	Date 20/01/2023
Finance	Kim Wratten	Date 30/01/2023
Legal	Sarah Halliwell	Date 30/01/2023
Communications	Luenne featherstone	Date 18/01/2023
Equality Duty	Harriet Yellen	Date 20/01/2023
Procurement	Lee Robertson	Date 31/01/2023
Risk	Jo Needs	Date 01/01/2023
Approved by	Matt Pearce	Date 01/02/2023

**Please include a glossary of terms, abbreviations and acronyms used in this report.**