

Briefing note

To: Health and Social Care Scrutiny Board (5)

Date: 19th November 2014

Subject: Sexual Health Services Procurement Feedback

1 Purpose of the Note

- 1.1 To update Scrutiny Board 5 members on the outcome of the recent Sexual Health Services Procurement for Coventry and Warwickshire
- 1.2 To update Scrutiny Board 5 members regarding follow up of action points raised at Scrutiny Board 5 on 2 April 2014, when a paper was presented regarding the proposed retendering of Sexual Health Services

2 Recommendations

2.1 Board members are asked to consider the outlined outcome of the retendering process and the responses given to recommendations proposed by the Board on 2 April 2014.

3 Information/Background

Background

From the 1st April 2013, Local Authorities have been mandated to commission comprehensive open access sexual health (SH) services (including free sexually transmitted infection testing and treatment, notification of sexual partners of infected persons and free provision of contraception). 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.

Coventry City Council retendered sexual health services jointly with Warwickshire County Council and NHS England Specialised Commissioning Team (commissioners of HIV treatment services). Following extensive consultation with key stakeholders, an Invitation to Tender (ITT) for Sexual Health and HIV Services in Coventry and Warwickshire was published on 16th June 2014, with the intention that each authority would award its own contract. NHS England Specialised Commissioning agreed to award contracts for the treatment of HIV to whom ever won the contracts for Sexual Health Services.

Following evaluation of tender documents and a pre-award clarification meeting, the contract for Coventry City Council has been awarded to Coventry and Warwickshire Partnership NHS Trust (CWPT), who are the incumbent providers. The outcome for Warwickshire County Council is awaited.

The scope of the service specification includes provision of integrated specialised sexual health services (Genitourinary Medicine services (including the local element of the National Chlamydia Screening Programme), and Contraception and Sexual Health Services) to include delivery of the C-card condom distribution scheme, with a particular focus on the use of IT to support delivery.

The new contract will commence on 1st April 2015. The contract value is £3.63 m, of which 10% will be only be paid on successful achievement of stretching performance indicators.

Follow up of recommendations of Scrutiny Board 5

Below are outlined the recommendations of Scrutiny Board 5 given on 2 April 2014 with responses.

(a) The Sexual Health Services be recommended to work with the faith communities including the free schools, taking up the offer of assistance from Councillor Sehmi.

The sexual health service specification states explicitly that services are to "ensure that services are equitable to all residents of Coventry and Warwickshire regardless of their race, religion, age, gender, economic status, physical or mental ability, or sexuality". The Provider will complete and act upon an Equality Impact Assessment which will be conducted on an annual basis.

The specialist services will work with schools, as part of the health promotion, Chlamydia Screening and outreach requirements built into the service specification. However, there will also continue to be an important link with schools through the Respect Yourself Programme, which will continue to engage with free and faith schools. The sexual health services provider is required to develop a health promotion plan jointly with commissioners, into which we are able to build work with faith communities. Recently, a local Consultant in Genitourinary Medicine presented at the Interfaith Forum in Coventry regarding the challenges and undeserved stigma which continue to be associated with HIV, and certain faith communities are being engaged through our HIV testing promotional programme.

(b) A continuous assurance be provided that lesbians, gays and bisexuals will continue to be provided with the appropriate sensitive support.

Please see above regarding equality aspects of the contract. Appropriate sensitive support for all individuals, according to need, is key to good sexual health service provision.

(c) The service to continue to work with the different community groups including supporting black Africans ensuring that individuals whose immigration status is not clear are not discouraged from accessing services.

The services are very aware of the need to work closely alongside and with communities at highest risk of sexually transmitted infections including HIV. Furthermore, outside of the contract for specialist services, a grant scheme for community organisations is currently delivering HIV awareness work and signposting for HIV testing in some of our highest risk communities. This

work is being supported by our incumbent (and future) providers of sexual health services, as is a pilot of point of care HIV testing in primary care.

As an integrated sexual health service, the service must operate an open access policy regardless of place of residence of the patient. This also includes overseas visitors, migrants, asylum seekers (including refused asylum seekers) and refugees as outlined in the link below: http://www.hpa.org.uk/MigrantHealthGuide/GeneralInformation/MigrantsAndTheNHS/Entitlement sToNHSCare/

(d) The service to continue to develop links with the mental health, drug and alcohol services.

One of the specific requirements of the specification for specialist services is to develop referral pathways with key partners including drug and alcohol services, mental health services (also currently provided by CWPT) and other key lifestyle services. The providers have shown a commitment to this requirement.

(e) A progress report be submitted to a future meeting of the Board once the new contract for sexual health services has been awarded.

Provided herewith

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