



Health Scrutiny Panel

11 December 2014

Report title	Sexual Health Consultation	
Cabinet member with lead responsibility	Councillor Sandra Samuels Health and Well Being	
Wards affected	All	
Accountable director	Sarah Norman, Community	
Originating service	Commissioning	
Accountable employee(s)	Susan Stokes	Public Health Locum Consultant Commissioning Officer Tel 01902 557949 Email Susan.stokes@wolverhampton.gov.uk
	Ravi Seehra	Public Health Locum Consultant Commissioning Officer Tel 01902 557949 Email Ravi.seehra@wolverhampton.gov.uk
Report to be/has been considered by	N/A	

Recommendation(s) for action or decision:

The Panel is recommended to consider the consultation plan and offer comments.

1.0 Purpose

- 1.1 This report aims to update the Health Scrutiny Panel on the consultation plan for the re-commissioning of the City's sexual health service by the Public Health department. It will outline the plan for consultation and present the information document in Appendix 1, which is available to the public and stakeholders.

2.0 Background and overview of proposed model

- 2.1 The Public Health department is responsible for commissioning most sexual health services across the City. A review of the sexual health services highlighted the need to commission sexual health services to meet the needs of the population, improve sexual health outcomes and reduce inequalities.
- 2.2 Nationally, there is a move towards an integrated Contraception and Sexual Health (CaSH) and Genito-Urinary Medicine (GUM) services. It is proposed locally that this will consist of a central 'hub' which delivers all services including more complex issues, with spokes which are community based and will offer more routine services, such as contraception and basic screening and treatment for sexual infection.
- 2.3 All GPs will continue to offer routine services under their general medical contract, but some GP practices will offer enhanced services in contraception and treatment for sexual infection, leading to more choices and places to go for the service user. Some essential contraceptive services and support will be provided in more 'natural settings' within the community, where particularly more vulnerable clients can be served. Pharmacists will also expand some services they offer to include chlamydia screening and the availability of condoms.
- 2.4 The proposed model would be underpinned through the promotion of sexual health advice and education by developing a culture that prioritises prevention and supports behaviour change. This would include motivating people to practice safer sex, increasing testing to reduce transmission and providing training and awareness to professionals. Expanding services to local primary care settings including the provision of robust health promotion information would support the approach of early intervention.

3.0 Consultation plan

- 3.1 There is a 12 week statutory consultation running from 3 November 2014 to 31 January 2015. Wolverhampton City Council – Public Health department will then collate all the responses received to inform the development of the specification.
- 3.2 There will be a number of components within the consultation to ensure that there is a wide and varied group of respondents. These are detailed in the table below

Stakeholders	Activity	Date
Public, GPs, Pharmacies, voluntary/statutory sector organisations, Facebook/Twitter	On-line public survey, Information documents and stakeholder feedback www.wolverhampton.gov.uk/sexualhealth	3 November-31 January 2015
Local Medical Committee	Presentation and discussion	25 November 2014
Sexual Health workforce- GUM, CaSH, NCP, HIV prevention, GP rep, pharmacy rep	One Workshop-at the Grand Station	2 December 2014
Public and stakeholders	Two Workshops-at the Grand Station	3 and 10 December 2014
GP locality meetings	Presentation to introduce sexual health model and process	6 and 20 November, 3 December
Team W	Workshop	29 January 2015
Professional/ stakeholders	Feedback form www.wolverhampton.gov.uk/sexualhealth	3 November-31 January 2015
Existing/potential Service users	Activity	Date
Gum/CaSH including other delivery sites (i.e. Bilston College, Base 25, LGBT, Substance Misuse)	Questionnaires and confidential box to be left at key sites- response to be reviewed after three weeks.	19 November-10 December
HIV prevention	Questionnaires and confidential box	19 November
Young people within Base 25 and Epic Youth Cafe	Completing survey with potential service users working in a focus group setting	15 December
Schools/PRU and Special Schools	Completing survey with potential service users in a school setting	Dates to be set in January

- 3.3 Paper surveys and confidential boxes have been placed at key sites including existing CaSH- including college sites, GUM, HIV prevention services and other key locations including the substance misuse service, Base 25 and Lesbians, Gays, Bi-Sexuals and transgender (LGBT). In January 2015 responses will be reviewed to ascertain whether a range of groups have been engaged in partnership with HealthWatch. If certain groups are underrepresented, a targeted approach with HealthWatch will be adopted to ensure that every opportunity is given to engage with the population.

- 3.4 A targeted approach has been adopted with young people. This includes ensuring that existing service users that attend City of Wolverhampton College are encouraged to complete the survey. Secondary schools, Pupil Referral Unit and Special Schools from year ten upwards have been approached to get involved. The survey has been amended and focus groups will be facilitated to engage young people in a more meaningful way. To ensure a consistent approach, this method will also be utilised by Base 25.

4.0 Financial implications

- 4.1 Funding for Public Health is provided to the Council by the Department of Health in the form of a ring-fenced grant. The total funding settlement for Public Health for 2014/15 is £19.3 million
- 4.2 The total budget allocated for 2014/15 for sexual health contracts and services is £3.3 million. An additional sum of £20,000 from within the general Public Health budget has been identified and allocated to fund the additional costs associated that were associated with the sexual health review that was conducted between September 2013 and June 2014 and also the re-commissioning of sexual health services.

[NM/02122014/W]

5.0 Legal implications

- 5.1 There is an immediate legal requirement to complete a 12 week consultation. Efforts are being made to engage with a variety of groups to ensure there is a range of feedback.

[RB/02122014/G]

6.0 Equalities implications

- 6.1 An initial screening has been completed and there is no need to complete a full equality analysis, given that a comprehensive review was conducted which highlighted a number of groups are disproportionately represented.

There are robust monitoring systems already in place which indicate that there is a high take up of sexual health services by residents from the most deprived areas of the City. Therefore many groups protected by equality law already use the service; however there is an on-going need to address issues that may disproportionately affect more vulnerable groups for instance earlier HIV detection in certain communities and young people. The key identified areas will be an integral component when re-commissioning the service.

7.0 Environmental implications

- 7.1 There are no environmental implications arising from this report.

8.0 Human resources implications

8.1 There are no human resources implications arising from this report.

9.0 Corporate landlord implications

9.1 There are no corporate landlord implications arising from this report.

10.0 Schedule of background papers

10.1 None.