

FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

DERBYSHIRE HEALTH AND WELLBEING BOARD

29 March 2023

Report of the Director of Public Health

Annual update on the Section 75 Agreement for commissioned sexual health services

1. Purpose

The Health and Wellbeing Board is asked:

- (a) to note this report and the progress made within the section 75 agreement for commissioned sexual health services during 2022/23
- (b) to endorse the Sexual Health Alliance as the strategic Forum to engender greater collaboration to improve sexual health outcomes and to strengthen membership of organisations in the Alliance where there may be gaps.

2. Information and Analysis

- 2.1 The section 75 (s75) agreement commenced on 1 April 2022. The partnership is between Derbyshire County Council and Derbyshire Community Health Services NHS Foundation Trust (DCHS NHSFT), DCHS being the lead provider of the Integrated Sexual Health Service.
- 2.2 The current service is compliant with the services that all local authorities who are delivering Public Health services are mandated to deliver to ensure provision of open access sexual health services including:
 - Contraception including long acting reversible contraception (LARC) in primary care
 - Testing and treatment of sexually transmitted infections (STIs)
 - Sexual health aspects of psychosexual counselling

- Sexual health specialist services including young people's services, outreach, HIV prevention and sexual health promotion.
- Pre-exposure prophylaxis (PrEP) for the prevention of HIV.
- 2.3 Derbyshire service delivery is through an innovative multiple delivery model developed over many years to meet patient need and to maximise access across the diverse demographic locally. Approaches include:
 - Digital delivery of services for screening of STIs and provision of some forms of contraception, such as oral contraceptives, emergency contraception and condom provision.
 - A requirement to provide face-to-face delivery across multiple settings, including clinic provision through a hub and spoke model
 - Delivering targeted outreach through voluntary and community sector partners and the Sexual Health Improvement and HIV Prevention team providing services across multiple delivery models including one to one intensive support, group support and outreach across multiple venues and settings to ensure best accessibility for those most at risk. Virtual support is also delivered as appropriate.
 - Subcontracted services in various settings including general practice, pharmacy and voluntary sector.
 - Providing an interface across the wider sexual and reproductive health system endeavouring to ensure smooth pathways for patients from one externally commissioned service to another.
- 2.4 A main benefit of s75 models is to generate greater collaboration and innovation at pace to meet changing sexual health needs and to realise a more stable sexual health system through collaboration across the plethora of different commissioners and providers working within different and separate sexual health budgets. This system fragmentation both nationally and locally can result in confusion about partner roles and accountability and this can result in risks to efficiency and seamless care for patients.
- 2.7 The Derbyshire s75, evolving since April 2022, is already showing progress in terms of supporting greater collaboration and partnership working across our local sexual health system. Examples include:
 - A new Chlamydia pathway programme
 - HIV Prevention Forum and evolving action plan
 - Strengthening the Teenage Pregnancy Partnership Forum and evolving action plan
 - Early identification of the need to strengthen patient pathways across the system.

- 2.8 A significant development from the s75 is the new Sexual Health Alliance (SHA), established in the summer 2022. This forum aims to drive a local strategic vision to improve population sexual health outcomes. The SHA includes representation from sexual health commissioning, provider organisations and associated organisations including the voluntary and community sector. The SHA is aligned to the Integrated Care System footprint. Current actions of the Alliance include:
 - Emerging clarity about the local commissioning landscape for sexual health - who commissions what, who provides what, where budget sits in order to identify areas of overlap, gaps and where improvements and efficiencies can be made
 - Understanding the patient's lived experience in their navigation of the current system with a focus on individuals and groups with vulnerability
 - Collaborating on a sexual health needs assessment as part of the Joint Sexual Health Needs Assessment (JSNA), to underpin a new system wide strategy for sexual health
 - Arranging a collaborative event, May 2023 to drive the JSNA findings for sexual health and agree strategic priorities for the new 3 year strategy
 - Joint agreement across local responses to changing sexual health priorities at national level
 - Exploring patient pathways where concerns are identified:
 - Contraception access across different settings
 - Pathways to digital provision post-COVID
 - HIV Prevention
 - Under 25s sexual health Chlamydia prevention, teenage pregnancy prevention, Relationship and Sex Education
 - Embedding a safe, honest space for all organisations to share success and address challenge
 - Embedding agreed working principles, towards a charter of behaviours and values, ensuring a strong alliance to drive population sexual health improvement with a focus on prevention and inequality.

3. Alternative Options Considered

3.1 This report is provided as an update, so no alternative options are considered.

4. Implications

4.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

5. Consultation

- 5.1 The mandatory public consultation was carried out to seek views on the proposed section 75 agreement between Derbyshire Community Health Services NHS Foundation Trust (DCHS NHS FT) and Derbyshire County Council (DCC), to enable DCHS NHS FT to deliver sexual health services on behalf of DCC, with the aim of improving health and wellbeing outcomes for all who access sexual health services.
- 5.2 The consultation ran for 42 days from 1 June to 12 July 2021. An online questionnaire was available on the Have Your Say Page of the Derbyshire County Council website, paper copies were available on request. The Final report concluded that respondents were in agreement for the Council to develop the future of the Derbyshire Integrated Sexual Health Service through a formal partnership agreement (Section 75) with the current provider, Derbyshire Community Health Services NHS Foundation Trust.

6. Partnership Opportunities

- 6.1 The Sexual Health Alliance offers opportunities for Health and Wellbeing Board partner organisations to consider the inclusion of sexual health and wellbeing improvement in respective action planning at organisational level and across local Place Alliances. The Alliance welcomes the local knowledge that can be brought by partners at this more local level. Examples for consideration include:
 - the promotion of services and strengthening of patient pathways between local services and sexual health services. This should engender awareness of the different offer provided within the Derbyshire s75 including provision at clinics, outreach services, digital online services, subcontracted services through general practice, pharmacy and voluntary and community sector partners. Service information is found at:
 - Home (yoursexualhealthmatters.org.uk)
 - ensuring frontline staff working with groups at higher risk of poor sexual health outcomes are enabled to access sexual health services as required to support their health and wellbeing. Individuals and groups at higher risk include young people (13 – 25yrs), vulnerable young people including young people within the care system and care leavers, NEET, young people involved in the criminal justice system, young people at risk of sexual exploitation. Adults at higher risk include those who may struggle

- to access health services including substance misusers, commercial sex workers, prison leavers, adults with disability, adults with poor health literacy and communities living in identified areas of high deprivation. It is encouraged for frontline staff to utilise approaches of engagement including quality conversations and make every contact count (MECC)
- ensuring patient pathways are known by partners working with other vulnerability to poor sexual health outcomes including individuals identifying as MSM (men who have sex with other men), LGBT (lesbian, gay, bisexual; and transgender) and PLHIV (people living with HIV).
- 6.2 The Sexual Health Alliance seeks support from all commissioning organisations who directly commission aspects of sexual health or specific services for the benefit of vulnerable populations to consider liaising with the Alliance, working in collaboration to minimise further risk of service fragmentation and to ensure seamless pathways for patients across the local sexual health system.
- 6.3 A Sexual Health Needs Assessment is nearing completion, culminating in a stakeholder event 4 May to discuss findings and work towards agreement of local recommendations and strategic priorities. The Alliance asks Board member organisations to consider their:
 - Engagement to receive and comment on findings and priorities either directly to the Alliance or at attendance at the event planned for 4 May
 - Support to receive outcomes from May at respective local forums and across Place Alliances to support action going forward agreed at respective local forums and Across Place Alliances.
- 6.4 At a strategic level the SHA is interested to explore its relationship with the Place Boards, with regard to understanding any expectations of the SHA from the boards, and how the boards can empower the SHA to maximise the sexual health and wellbeing of the Derby and Derbyshire population, address inequalities and support reduction of system inefficiency.

7. Background Papers

7.1 Cabinet Report 10 March 2022 Approval of the Derbyshire Sexual Health Service within a section 75 for implementation April 2022 (Item 77/22 Restricted)

8. Appendices

8.1 Appendix 1 – Implications.

9. Recommendation(s)

The Health and Wellbeing Board is asked

- a) to note this report and the progress made within the section 75 agreement for sexual health commissioned services
- **b)** to endorse the Sexual Health Alliance as the strategic Forum to engender greater collaboration to improve sexual health outcomes and to strengthen membership of organisations in the Alliance where there may be gaps.

10. Reasons for Recommendation(s)

- 10.1 The recommendation (a) for the Board to note progress made at the end of this first year is important because the s75 has taken time to evolve and embed itself and the partnership welcomes comment from the Board.
- 10.2 The recommendation (b) for Board partners to endorse the Sexual Health Alliance as the strategic Forum to engender greater collaboration to improve sexual health outcomes and to strengthen membership of organisations in the Alliance where there may be gaps is important to ensure a strong strategic oversight from a plethora of organisations to ensure improved sexual health outcomes, a reduction of inequality and a focus on patient need.

Report Author: Mary Hague, Public Health Lead; Andy Raynor,

Commissioning Manager

Contact details: mary.hague@derbyshire.gov.uk

Organisation: Derbyshire County Council

HWB Sponsor: Ellie Houlston, Director of Public Health.

Implications

Financial

1.1 There are no financial implications of this report.

Legal

2.1 There are no legal implications of this report.

access sexual health services.

Human Resources

3.1 There are no human resource implications of this report.

Equalities Impact

4.1 The services outlined above pro-actively include focus on groups with vulnerability across Derbyshire communities and this includes groups with protected characteristics under Equality legislation. Such groups being at higher risk of poor sexual health outcomes. Maintaining optimum sexual health is not equally distributed within the population. Poor sexual health outcomes are associated with deprivation and with identified population groups including young people and young people of vulnerability, men who have sex with men (MSM), people living with HIV (PLHIV), individuals who identify as lesbian, gay, bisexual and trans (LGBT) and black and minority ethnic groups.

Some groups at higher risk of poor sexual health outcomes perceive or experience stigma and discrimination, which can influence their ability to

Partnerships

5.1 Supporting good sexual health outcomes for the population has to involve a collaborative and partnership approach. There is still a need to ensure sexual health services are considered routine and part of an individual's daily health and wellbeing just like another area of health. Perceived barriers are still present for some groups in our population because of a real fear of service access due to perceptions of stigma, non-

confidentially and judgement. Partner support is key to minimise such fear experienced by some groups.

Partner organisations working with populations at higher risk of poor sexual health outcomes are vital to support their access to services when they are needed. A making every contact count (MECC) is supportive in this

A partnership approach for sexual health whether it be across commissioned processes and provider services will result in more efficient provision and a more streamlined access for individuals with a need in our population.

Hence this report considers the above reasons as important for consideration by Board members, with specific recommendations to action stated in section 6 in this report.

Health and Wellbeing Strategy priorities

6.1 Good Sexual Health contributes to the priority "Enable people in Derbyshire to live healthy lives." Good sexual health is fundamental to the overall health and well-being of individuals, couples and families, and to the social and economic development of communities. Sexual health, when viewed affirmatively, requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.

Other implications

7.1 The s75 agreement for sexual health services supports the principles of whole-system and partnership working across the system within Joined Up Care Derbyshire and has resulted in the formation of the new Sexual Health Alliance to lead the development of the local strategic vision for sexual health. It ensures a collaborative approach to designing population-based sexual health services to meet local need.