

**DERBYSHIRE COUNTY COUNCIL**

**MEETING WITH CABINET MEMBER, HEALTH AND COMMUNITIES**

**22 July 2021**

**Report of the Director of Public Health**

**Transfer of Sexual Health Out of Area Underspend to Derbyshire Community Health Services NHS Foundation Trust and Procurement of a Research Project**

**1. Purpose of the report:**

To seek Cabinet Member approval to transfer a proportion of the underspend from the Public Health Sexual Health 20/21 Out of Area Budget to Derbyshire Community Health Services NHS Foundation Trust (DCHS) to support innovations in the Sexual Health Promotion Service.

Also, to seek Cabinet Member approval to procure and award a research project with the aim of understanding the sexual health and wellbeing needs and barriers to accessing services for those who are disproportionately affected by poor sexual health outcomes.

**2. Information and analysis:**

The annual budget for the Derbyshire Integrated Sexual Health Service for 2020/2021 was £4,971,457. Most of this budget is allocated across five tariff-based elements of the contract equating to £4,148,409.

Due to the COVID 19 pandemic in the 2020/2021 financial year all payments for the sexual health service have been paid using block payments. These block payments do not include the additional Out of Area (OOA) budget held by the Council to pay for Derbyshire residents who access sexual health services in other areas of the country. There is an additional £1.6 million for these OOA costs.

The COVID-19 pandemic has led to a reduction in travel and subsequently less people accessing sexual health services in other areas of the country. As a result, there was a substantial underspend in the 2020/2021 financial year within the OOA budget of £837,721.

SMT have given approval to utilise a proportion of this underspend to support the delivery of additional sexual health services. This paper seeks approval to transfer some of these funds to DCHS.

By transferring these funds to Derbyshire Community Health Services NHS FT, it will enable the Sexual Health service to provide the highest service quality by utilising core contacts, knowledge, and skills. This also enables an excellent opportunity for a joint working partnership approach between Derbyshire County Council and Derbyshire

Community Health Services NHS FT as we move forward into the Integrated Care System model.

The additional elements are:

1. Sexual Health Promotion Outreach Van, that will offer a community-based and targeted approach which addresses health inequalities, reduces stigma, and normalises positive sexual health for all by taking sexual health provision into communities to increase engagement.
2. Derbyshire Integrated Sexual Health Service (ISHS) Accessibility and Engagement Fund, to support organisations and groups which work with communities most vulnerable to poor sexual health. Whilst the ISHS proactively works to address stigma around accessing sexual health services for some hard to reach communities there are often significant barriers to accessing mainstream services. The best way to work with these groups is to work with organisations that already have established relationships with them. Therefore, this fund invests in community projects, groups and activities which aim to address these barriers and improve sexual health outcomes for vulnerable groups.
3. MSM. Sexually active gay, bisexual and other men who have sex with men are at higher risk of contracting STIs. In the UK over half of all new HIV positive results occur among MSM and the majority of new syphilis infections are in this community. This cohort are hard to reach and tend to be involved with multiple risky behaviours. Therefore, it is proposed that DCHS subcontract with a specialist organisation to target these high risk groups.
4. IT developments, to allow more routine issues to be self-managed and give more time for vulnerable clients to be seen face to face in a clinic setting. This will be done by upgrading some of the IT infrastructure across the sexual health service and the deployment of self-serve check in kiosks at the main clinic in Chesterfield.
5. Summer campaign. The lockdowns have restricted the movements of most single people and with the potential of a summer easing resulting in increased opportunities to get-together, the service needs to be ready to encourage those aged 16 and over to have fun with their freedom but enjoy safer sex. The intention is to create a visible and fun summer campaign that gets people talking and is inquisitive enough for people to want to find out more and remind them about the Derbyshire Integrated Sexual Health Service.

This paper also seeks approval from the Cabinet Member for permission to procure an organisation with a proven track record of research and evaluation to:

1. undertake a piece of collaborative research with DCHS to understand the sexual health and wellbeing needs and barriers to accessing services for those which are disproportionately affected by poor sexual health outcomes; and
2. to provide for these groups a set of co-developed recommendations for delivering effective and accessible Integrated Sexual Health services. This project will be procured via the public health commissioning team and will be funded from the OOA underspend.

Finally, this paper seeks approval from the Cabinet Member to delegate the authority to award the contract for this piece of work to the Executive Director.

### **3. Social Value considerations:**

The Derbyshire Integrated Sexual Health service will continue to support the local community, with regard to the health and wellbeing of the population and will contribute to a thriving Derbyshire by providing a service that enables residents to develop healthy behaviours.

In addition to delivery of the overall sexual health service, DCHS have also committed to delivering the following outcomes in Derbyshire:

- Supporting local businesses to expand;
- Developing the talents and skills of local people;
- Reducing organisations' running costs so they can target their resources where they are needed most; and
- Investing in local businesses, and working with them to design and shape services that meet local needs.

DCHS will continue to develop ways to deliver services against these outcomes during the Covid-19 pandemic. DCHS will continue to provide specialist coaching and training for community and voluntary organisations within Derbyshire where appropriate.

Evidence suggests that investing more in the upstream sexual health promotion elements of the service will improve long term outcomes. There is strong evidence of cost-effectiveness for a range of sexual health interventions and this work area is developing further to show impact of sexual health interventions on wider socio-economic factors e.g. a teenage pregnancy can have a risk of negative impact on mother and child through impact on schooling, employment, benefit and housing costs.

### **4. Financial Considerations.**

The value of each of these additional projects is.

- Outreach van £40,000
- Accessibility and Engagement Fund £50,000
- MSM organisation £35,000
- IT developments £40,000
- Marketing £20,000

Total to be transferred to DCHS £185,000

- Research Project to be commissioned by DCC £60,000

The underspend for the 20/21 Public Health OOA budget was £837,721 and the finance for these projects can be provided from this underspend.

### **5. Legal Considerations**

The approval to transfer £185,000 for the 5 elements laid out within this report to Derbyshire Community Health Services NHS Foundation Trust will be made under Protocol 10 of Derbyshire County Council's Financial Regulations and PCR2015

regulation 72 (b) (i) and (ii). Both Procurement and Legal Services have been consulted as part of the business case approval which is required as part of the Protocol 10 process.

The procurement of research will be carried out in accordance with Protocol 5 of Derbyshire County Council's Financial Regulations. Protocol 5 stipulates that where a procurement is not included in the approved Departmental Service Plan, approval to award the contract must be obtained from the appropriate Cabinet Member. The Constitution allows the Cabinet Member to delegate this function to the Executive Director.

**5. Other considerations:**

In preparing this report the relevance of the following factors has been Considered; prevention of crime and disorder, equality of opportunity, human resources, environmental, health, property, and transport considerations.

**5. Background papers:**

SMT Paper, 22 March 2021, Utilisation of Underspend from the Sexual Health Out of Area Budget.

Business case to Transfer of Sexual Health Out of Area Underspend Funds to Derbyshire Community Health Services NHS Foundation Trust.

**6. Key Decision:**

No

**7. Call-in:**

Is it required that call-in be waived for any decision on this report? No

**8. Officer's Recommendation:**

That the Cabinet Member:

1. approves the transfer of funding to DCHS to the value of £185,000 from the OOA budget for the Sexual Health Promotion Outreach Van; Derbyshire Integrated Sexual Health Service (ISHS) Accessibility and Engagement Fund; commission a specialist for MSM & LGBT community; IT developments; and marketing projects.
2. approves the procurement of a provider to undertake a piece of collaborative research with DCHS to understand the sexual health and wellbeing needs and barriers to accessing services for those which are disproportionately affected by poor sexual health outcomes with a maximum value of £60,000; and
3. delegates the authority to award a contract for the research to the Director of Public Health.

**Dean Wallace  
Director of Public Health**