

**Executive Member for Adult Social Care and Health      14 February 2019.**  
**Decision Session**

Report of the Director of Public Health

**Sexual Health Services**

**Summary**

1. The purpose of this report is to seek authorisation to award a contract to York Hospitals NHS Foundation Trust for the provision of sexual health services to the population of City of York.
2. Local authorities have a statutory responsibility to commission specialist sexual health services for their population. On 12 July 2018 the Executive made a decision to:
  - a) Authorise officers within City of York Council to approach the market to inform the commissioning and procurement of a new sexual health service to start from 01 July 2019.
  - b) Authorise the Director of Public Health, in consultation with the Executive Member for Adult Social Care and Health, to accept the highest scoring tender in accordance with evaluation criteria and award a contract
  - c) Delegate authority to the Director of Public Health to manage this contract including any variations and planned extensions as per City of York Council policy and procedures.
3. The procurement process has been completed and York Hospitals NHS Foundation Trust has submitted a bid which has been successfully evaluated in accordance with the agreed criteria.

**Recommendations**

4. The Executive Member is asked to authorise the Director of Public Health to award a contract to York Hospitals NHS Foundation Trust to provide sexual health services for City of York residents

*Reason: To meet the council's statutory responsibilities under the Health and Social Care Act 2012 and enable sexual health services to be available to York residents that are clinically safe, value for money and responsive to local need.*

## **Background**

5. City of York Council became responsible for commissioning sexual health services when responsibilities for public health functions were transferred to the Council in April 2013.
6. Sexual health services are funded by the local authority ring-fenced Public Health Grant Allocation. The Department of Health sets out a number of conditions for use of the public health grant. Local authorities are required to submit performance monitoring reports on sexual health outcomes as part of the Public Health Outcomes Framework.
7. Sexually transmitted infections (STI's) are a recognised issue for any city and York is no exception, all cities need to maintain services to protect the health of residents and prevent disease outbreaks.
8. Providing open access, all age services across the city reduces sexual health inequalities and risks to the population.
9. The impacts of poor sexual health are felt across the population and the evidence base shows that investment in sexual health services results in a strong and substantial return on investment.

## **Service detail**

10. The service specification has been developed as a result of several influencing factors: National statutory obligations, clinical safety, best practice guidelines, local needs analysis, stakeholder and customer consultation as well as benchmarking against other models in similar local authorities.
11. The specification sets out City of York Councils ambition for the transformation of sexual health services in York and explains the detailed requirements the Council has to provide the specialist expertise that will be vital in leading and achieving the desired outcomes for its residents.

12. Any service specification for this type of service must follow a recognised clinically safe framework which is set out at national level.

## **Consultation**

13. Work has been undertaken with a range of partners and clinical experts to inform the service delivery model and vision for the service:
  - a. A time limited sexual health commissioning steering group was established. This included key partners and provided a forum for ongoing discussion of priorities.
  - b. Clinical practitioners have been engaged through the Vale of York Clinical Commissioning Group and Public Health England.
  - c. Consultation with service recipients and professionals, including schools, through surveys, workshops and face to face meetings.
  - d. Key academic research and national best practice was searched and analysed to inform thinking.
14. Further consultation took place during the market place engagement and soft market testing event and processes.
15. Engagement with Vale of York Clinical Commissioning Group and primary care partners is ongoing through the development of a clinically safe service specification.

## **Options**

16. There are two options for the Executive Member to consider:  
**Option 1:** Do not approve the award of a contract  
**Option 2:** Authorise the Director of Public Health to award a contract to York Hospitals NHS Foundation Trust for the provision of sexual health services following a successful tender process carried out in line with City of York Council own Contract Procedure Rules and EU procurement legislation.

## **Analysis**

17. **Option 1:** Do not approve the re-procurement

This option would mean that City of York Council will not fulfil its statutory duty as set out in the Health and Social Care Act (2012)

Failure to ensure that the City has safe and effective sexual health services would have negative consequences for the health of residents. Some of the consequences include increasing levels of sexually transmitted infections, increasing numbers of unplanned pregnancies including teenage pregnancies, increase in long-term preventable health conditions and preventable deaths.

Therefore this option is not recommended.

Option 2: Authorise the Director of Public Health to award a contract to York Hospitals NHS Foundation Trust for the provision of sexual health services following a successful tender process carried out in line with City of York Council own Contract Procedure Rules and EU procurement legislation.

**This is the recommended option.**

*Reason: To meet the council's statutory responsibilities under the Health and Social Care Act 2012 and enable sexual health services to be available to York residents that are clinically safe, value for money and responsive to local need.*

## **Council Plan**

18. The proposal directly relates to the Council Plan 2015-19 priorities:
  - **'A focus on frontline services'** - to ensure all residents, particularly the least advantaged, can access reliable services and community facilities.

## **Specialist Implications**

### **Financial**

19. The budget for the Sexual Health Services contract totals £1.4m per annum funded from the local authority public health grant allocation.
20. The proposal is to award a contract for an initial three year period with an option to extend by two years plus consideration of a further two years, subject to performance, up to a maximum of seven years. Extensions will be based on performance related quality measures and delivery of key health outcomes. This is considered to be the option which will lead to the Council obtaining

best value for money whilst meeting its statutory obligations and provide a clinically safe and effective service for its citizens.

## **Human Resources (HR)**

21. There are no Human Resources implications from this report.

## **Equalities**

22. The Council must, in the exercise of its functions have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it. The Council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons disabilities, and encourage people to participate in public life. The Council must have due regard to the need to tackle prejudice and promote understanding.
23. It is crucial that the differing needs of men and women and of different groups in society are considered when planning services and interventions. Nationally females are statistically more likely to access specialist sexual health services and the provision of sexual health services has a positive affect on the general and sexual health and wellbeing of women.
24. Locally MSM (men who have sex with men) populations are statistically more likely to be diagnosed with Syphilis infection which is rising. MSM communities are also more likely to have higher instances of HIV. Providing services for this customer group enables individuals to live healthy lifestyles and avoid early mortality.
25. Although it is difficult to estimate the numbers of residents affected in York, sexualised recreational drug use or chemsex is associated with an increase in sexual risk-taking behaviours in men who have sex with men (MSM). Chemsex is associated with group sex and multiple sexual partners, serodiscordant condomless sex and STI transmission. Chemsex is, therefore, an important public health issue among MSM.

26. In York, like any city in the UK, we have both licensed sexual establishments and informal sex worker (SWs). SW's are assumed to be at increased risk of sexually transmitted infections (STIs), there are limited comparative data studies with other population groups available and there is very little data available about York specifically. This is recognised as a vulnerable population and statistically is likely to include a higher than average representation of women, MSM and transgender residents.
27. The Community Impact Assessment shows that there is a potential negative impact of the reduction in the budget available for sexual health services related to particular vulnerable groups.

### **Legal**

28. Section 12 of the Health and Social Care Act 2012 imposes a statutory duty on local authorities to take such steps as it considers appropriate for improving the health of the people in its area and addressing behaviour that is detrimental to health. This section provides that local authorities may provide services or facilities that meet criteria under section 12 (3). The provision of the services discussed within this report should fall within steps allowed under section 12.
29. The procurement of these services has been undertaken in accordance with the Public Contracts Regulations 2015 and any other related EU and UK law. Compliance with the Contract Procedure Rules of the Council has been maintained.

### **Crime and Disorder**

30. There are some shared links to crime and disorder, the service offer will include occasional contact with victims of sex crime, domestic violence as well as illegal sex working, modern slavery and child sexual exploitation cases.

### **Information Technology (IT)**

31. There are no IT implications.

### **Property**

32. There are no property implications.

## Risk Management

33. There are risks associated with securing a safe and effective service within the budget allocated, particularly as the population of York is predicted to expand in the key 15-25 age group inevitably leading to increased demand for services. These key risks and mitigations are set out below:
- Inability to provide mandated sexual health service
  - Poor sexual health outcomes for the population of York including -
    - Reduced clinical safety leading to an increased risk of uncontrolled sexually transmitted infection outbreaks including a rise in HIV and late diagnosis of HIV
    - Increased risk of drug resistant gonorrhoea
    - Future negative financial impact on CYC through increase demand on social care
    - Negative social impact on the population of York e.g. a rise in under 18 conception rates leading to an increased demand on children's services
    - Increase in morbidity and premature mortality rates
  - Reputational damage to the Council for not meeting its statutory duty to ensure free and open access to sexual health services for its residents
34. These risks are being mitigated through partnership working and system wide public health leadership through the newly established York Sexual Health Expert Partnership, and ongoing clinical engagement with the Vale of York Clinical Commissioning Group and Primary Care. Identifying areas of joint working and seeking to establish shared care pathways.

## Contact Details

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Report  
Approved

Date 04/02/19

### Specialist Implications Officer(s)

Finance – Patrick Looker, Finance Manager

Legal – Ryan Bell

Equalities – Will Boardman, Head of Policy and City Partnerships

**Wards Affected:** *List wards or tick box to indicate all*

**All**

**For further information please contact the authors of the report**

## Glossary of Terms

CYC – City of York Council

CCG – Clinical Commissioning Group

EU – European Union

HIV – Human Immunodeficiency Virus

MSM – Men who have sex with Men

NYCC – North Yorkshire County Council

STI – Sexually transmitted infection

SW – Sex worker

TUPE – Transfer of Undertakings (Protection of Employment)

## Background Papers

Executive Report 12 July 2018 Re-procurement of Sexual Health Services