

Report to Alison Challenger, Director of Public Health

May 2022

Integrated Sexual Health and HIV Services Contract Extension

Report by Patrick Stoakes, Public Health Lead (Sexual Health)

Electoral division(s): All

Summary

The Council are mandated to commission open-access, comprehensive, sexual health services for the population of West Sussex. NHS England (NHSE) is responsible for the provision of HIV treatment and care services.

In September 2019 ([Report ref: OKD20 19/20](#)) the Director of Public Health approved the award of the Integrated Sexual Health Service and HIV Services contracts to Western Sussex Hospitals NHS Foundation Trust for an initial period of three 3 years, commencing 1st February 2020, with an option to extend for up to two years, in agreement with NHSE. The provider has now merged with a neighbouring NHS trust to become University Hospitals Sussex NHS Foundation Trust.

This report requests that the Director of Public Health approves the contract extension for the provision of Integrated Sexual Health and HIV Services, in agreement with NHSE, for the permitted two years from 1st February 2023 to 31st January 2025.

Recommendation

The Director of Public Health is asked to approve the contract extension for the provision of Integrated Sexual Health and HIV Services, in agreement with NHS England (NHSE), for the permitted two years from 1st February 2023 to 31st January 2025.

Proposal

1 Background and context

- 1.1 Sexual Health Services Regulations 2013 state that Local Authorities are mandated to provide comprehensive sexual health services for the population, these include; a full range of contraceptive service and advice on preventing pregnancy, Sexually Transmitted Infections testing and treatment, including the provision of Chlamydia testing services for young people under the age of 25

years, sexual health aspects of psychosexual counselling, outreach, HIV prevention and sexual health promotion and services in schools and colleges.

- 1.2 NHSE are mandated to commission HIV treatment and care services for the population.
- 1.3 The provision of an effective Sexual Health service makes clear contributions to Our Council Plan 2021 to 2025 in terms of Keeping People Safe from Vulnerable Situations and Helping People and Communities to Fulfil their Potential.
- 1.4 Empowering people to make informed choices about contraception and reproductive health reduces the social and health inequalities associated with unwanted pregnancy, particularly for teenage parents and their children. Effective prevention and widespread testing for HIV reduces the significant health and social care costs associated with late diagnosis. Sexual health screening and early treatment reduces the adverse impact of undiagnosed infections on long term health and fertility.
- 1.5 The current service is an Integrated Sexual Health/HIV Service and was procured jointly with NHS England /Improvement and delivers services to all residents of all ages.
- 1.6 The current contract was awarded to Western Sussex Hospitals NHS Foundation Trust in September 2019 following a compliant PCR 2015 process. The provider has now merged with a neighbouring NHS trust to become University Hospitals Sussex NHS Foundation Trust.
- 1.7 The Integrated Sexual Health Service contract commenced 1st February 2020 for an initial period of 3 years until 31st January 2023 with the option to extend for further 2 years until 31st January 2025. An extension period of two years is now being sought for approval.
- 1.8 The annual contract value is £4.3m. The total contract value over 5 years will be £21.5 m
- 1.9 The tariff element covers sexual and reproductive health consultations, STI testing and treatment, psychosexual counselling, and contraceptive provision. The tariff includes HIV testing and the prevention of transmission though the prescription of Pre-Exposure Prophylaxis (PrEP), but HIV treatment and care is commissioned by NHSE. The block element covers condom distribution out of ISHS, health promotion and campaigns, sexual health and condom distribution training for stakeholders, outreach and pathways for at risk groups.
- 1.10 The current contract comprises national and local outcome measures. Performance is monitored quarterly against key public health outcomes. The current provider continues to deliver a good quality service and value for money. All mandated Key Performance Indicators (KPIs) are currently meeting contractual thresholds.
- 1.11 At the commencement of the COVID pandemic, the service significantly and rapidly redesigned its service model to ensure continued access that was safe for users and providers. Online testing was expanded, a digital model for the Condom Distribution Scheme was implemented and digital triage implemented. Individuals were able to access contraception via telephone consultations and asymptomatic screening via online testing. Where users required in person support, such as STI treatment or Long Acting Reversible Contraception (LARC)

procedures, services continued to operate from the 3 hub clinics through booked appointments.

- 1.12 STI test results are received on average within 4.3 days (KPI target within 10 working days). Chlamydia treatment is received on average within 7.5 days after positive result (KPI target within 6 weeks). There was an 18% increase in LARC procedures in 2020/21 compared to 2019/2020 despite two months suspension during lockdown. 100% of positive HIV people have partner notification plans and outcomes within 12 weeks of diagnosis (KPI target 90%).
- 1.13 The service contributes to low under 18 conception rates, low STI rates, high LARC uptake, and high HIV testing coverage compared to the rest of England.

2 Proposal details

- 2.1 In agreement with NHSE, it is proposed that the contract for Integrated Sexual Health and HIV Services with University Hospitals Sussex NHS Foundation Trust is extended for the permitted two years from 1st February 2023 to 31st January 2025.
- 2.2 NHS England Improvement have confirmed that a two year extension will be awarded for the HIV Treatment and Care service.

3 Other options considered (and reasons for not proposing)

- 3.1 The option to terminate and decommission was not considered as provision of a sexual health and HIV service is a statutory requirement.
- 3.2 The option to re-tender was considered. This option is not recommended because Provider performance throughout the ongoing pandemic has been excellent. E-procurement at this stage could be detrimental to contractual performance and may lead to loss of specialist workforce.

4 Consultation, engagement and advice

- 4.1 Other than through contract meetings, the provider reports on its activity to various multi-stakeholder forums that are facilitated by the Council. These include the Teenage Pregnancy Prevention Board and the Sexual Health Partnership Group. The provider reports on service user feedback and complaints and these are reviewed through contract meetings.

5 Finance

- 5.1 Revenue consequences

	Current Year 2022/23 £m	Year 2 2023/24 £m	Year 3 2024/25 £m
Revenue budget	£4.3m	£4.3m	£4.3m

- 5.2 This activity is funded through the Public Health Grant.

5.3 The effect of the proposal:

- (a) **How the cost represents good value.** A saving of £250k was made when the contract was tendered through rebasing the tariff in line with the nationally based tariff.
- (b) **Future savings/efficiencies being delivered.** No further savings are expected at the point of extension. There is also no contract indexation rise in the contract terms. We expect ongoing improved customer experience through greater access to digital and online offer/interventions and effective access across the county to a high quality and equitable service.
- (c) **Human Resources, IT and Assets Impact.** Health sector recruitment is currently challenging, and many providers are struggling with vacancies, particularly with the impact of COVID. Extending the current contract would provide stability in the workforce.

6 Risk implications and mitigations

Risk	Mitigating Action (in place or planned)
The risk of the service provider failing to deliver the service during the life of the contract extension.	Existing performance is good. Contract terms allow leverage through Improvement Plans if required. Supplier has been flexible and responsive throughout the Covid-19 pandemic.
Changes to the model of delivery in the Integrated Sexual Health Service might increase demand on the service, especially around on-line delivery.	The contract contains clauses which will allow restrictions in service delivery if costs approach the maximum financial envelope.
Risk of adverse Market Perception of not Tendering	We could expect there to be interest from the market at re-procurement. The option to extend was clear in the original tender documentation.

7 Policy alignment and compliance

- 7.1 The provision of an effective Sexual Health service makes clear contributions to Our Council Plan 2021 to 2025 in terms of Keeping People Safe from Vulnerable Situations and Helping People and Communities to Fulfil their Potential.
- 7.2 There are 2 distinct separate contracts, one Council contract for sexual health services and one NHSE contract for HIV Treatment and Care services. Both contracts have been aligned and are managed individually by each party in a collaborative manner. There is a collaboration agreement between the Council and NHSE, which sits alongside the two service contracts and will set out the parties roles and responsibilities in respect of the integrated service and management/monitoring of the two service contracts.
- 7.3 Under the Health & Social Care Act 2012 the Council has a mandatory obligation to commission these services.

- 7.4 This contract was competitively procured in line with the Public Contracts Regulations 2015 (PCR 15). The value and the extension were allowed for in the original procurement documents and contract and, therefore, the extension of the contract is permissible under the PCR 2015.
- 7.5 The contract will be extended on its existing terms and conditions that were drafted by the Commercial Legal Team and are compliant with the Council's Standing Orders on Procurement and Contracts.
- 7.6 There are no foreseeable Equality and Human Rights Act implications associated with this proposal. The service carries out targeted health promotion and outreach to meet the needs of vulnerable and at-risk groups in the local population and reports on the diversity of service users through regular contract meetings.
- 7.7 In terms of Crime and Disorder Reduction, in line with the service agreement, the service provider raises Safeguarding alerts where appropriate and contributes to Safeguarding investigations, procedures and processes including acting as Enquiry Officer where appropriate in accordance with current Pan Sussex Multi-Agency Policy and Procedures for Safeguarding Adults at Risk and Sussex Child Protection and Safeguarding Procedures.
- 7.8 In terms of Public Health, the Provider supports its service users to make changes such as stopping smoking, improving diet, increasing physical activity, losing weight and reducing alcohol consumption through its adoption of the Making Every Contact Count (MECC) approach.
- 7.9 There are no foreseeable Climate Change implications associated with this proposal.
- 7.10 Social Value was included in the procurement process as award criteria. The provider supports local charities and community enterprises through its training and outreach work. It helps individuals and groups in the community who may be vulnerable or disadvantaged through its targeted work with, amongst others, those with a learning disability, mental health issues, substance misuse issues, people selling sex or homeless. It contributes to the reduction of inequalities through supporting the work of the Teenage Pregnancy Prevention Board, The Sussex HIV Network and the Sexual Health Partnership Group.

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Appendices None

Background papers None