

MUNICIPAL YEAR 2018/2019 REPORT NO. 186

MEETING TITLE AND DATE:

Cabinet - 12th March 2019

REPORT OF:

Executive Director People,
Tony Theodoulou

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Agenda – Part: 1

Item: 5

**Subject: Extension of the Integrated
Sexual Health Community Services
Contract**

Wards: All

Key Decision No: KD4794

**Cabinet Member consulted: Cllr Yasemin
Brett**

1. EXECUTIVE SUMMARY

- 1.1 In July 2015 the Cabinet approved the award of contract for Integrated Sexual Health Community Services in Enfield to the North Middlesex University Hospital NHS Trust (NMUH) for an initial period of 3 years 5 months with options to apply two further extensions of 2 years to a maximum period of 7 years and 5 months.
- 1.2 This contract is due to come to an end on 31st March 2019 and a further extension of 2 years is sought to ensure stability in service provision.
- 1.3 Current payment for sexual health services is under a 'block arrangement' covering all Enfield residents who access services commissioned by LB Enfield and is capped at annual contract value.
- 1.4 NMUH has agreed to reduce the value of the block by £200k per annum (backdated to 1st November 2018) should the first 2 year extension to the contract be enacted.
- 1.5 This will be both costing saving to LB Enfield and will provide certainty to the provider for the next 2 years with the contract continuing to be capped at a maximum fixed price level for the duration of this extension.

2. RECOMMENDATIONS

- 2.1 Cabinet is asked to approve:
- 2.2 The extension of the Integrated Sexual Health Community Services Contract with NMUH for a further 2 years on a reduced block payment.
- 2.3 Delegation of authority to the Executive Director of People to extend the contract for a further 2 years in 2021 subject to satisfactory performance.

3. BACKGROUND

- 3.1 The Council has a statutory duty to provide Integrated Sexual Health Services as part of its Public Health England (PHE) Requirements.

The Local Authority's public health mandated responsibilities are:

- To protect the health of the local population
- To ensure appropriate access to Sexual Health Services

- 3.2 These services specialise in delivering sexual health protection and prevention treatment for the whole population. Together these services reduce the number of unwanted pregnancies and undetected sexually transmitted diseases that can have a long-standing effect on individuals and the community. Ultimately, these services make a positive contribution to addressing the health inequalities in the Borough.

- 3.3 In 2015 London Borough of Enfield tendered the three (3) services – Family Planning, GUM and Sexual Health Outreach Nurse - within the same contract to ensure the delivery of an integrated service and to attract competitive submissions from the market place.

- 3.4 In July 2015 the Cabinet approved the award of contract for Integrated Sexual Health Community Services in Enfield to the North Middlesex Hospital NHS Trust (NMUH) for 3 years 5 months with options to extend + 2 years and + 2 years (to a maximum period of 7 years, 5 months).

- 3.5 Sexual health services are currently on a block contract up until 31st March 2019. This includes Family Planning, GUM and Sexual Health Outreach, within the same contract to ensure delivery of an integrated service for the Borough. The block includes all Enfield residents who may access LBE commissioned services.

4. ALTERNATIVE OPTIONS CONSIDERED

- 4.1 Alternative options would include re-tendering the service at the end of this initial contract period of 31st March 2019 or removing the block element of the contract by being fully compliant with a payment by results mechanism.

- 4.2 As performance has continued to improve and NMUH is offering to reduce the value of the block these options were discounted.

5. REASONS FOR RECOMMENDATIONS

- 5.1 Extending the contract will be both a cost-saving for LB Enfield and provide certainty to the NHS provider for a further 2 years. It would afford efficiency gains for the Council addressing the steady growth of 13.5% and 7.5% in activity across year 1 and 2 respectively of this extension.
- 5.2 NMUH will be required to continue to increase in-borough activity for the GUM Service, leading to a reduction in out of borough activity thereby providing further efficiencies for the Council.

6 COMMENTS FROM OTHER DEPARTMENTS

6.1 Financial Implications

The Public Health Grant, is ringfenced in 2018/19 and 2019/20 and is designed to cover expenditure incurred in delivering the Public Health function, which covers mandated (statutory) services and non-mandated (non-statutory) services. Sexual Health Community services is a mandated function.

Please see Part 2 of this report for further Financial Implications.

6.2 Legal Implications

- 6.2.1 Section 111 of the Local Government Act 1972 enables local authorities to do anything, including incurring expenditure or borrowing, which is calculated to facilitate or is conducive or incidental to the discharge of their functions. Furthermore, the Council has the power under section 1 (1) of the Localism Act 2011 to do anything that individuals generally may do provided it is not prohibited by legislation and subject to Public Law principles. The recommendations within this report are in accordance with these powers.
- 6.2.2 The contract contains provision for an option to extend for two further periods of two years each. The Council now wishes to exercise the first of these extensions. The Council's Contract Procedure Rules (CPRs) allow for extensions providing that budget is allocated for the expenditure, value for money is demonstrated and appropriate authority for the variation is in place (see CPR 7.1).
- 6.2.3 The decision to extend this contract is a Key Decision and must therefore comply with the Council's governance processes for Key Decisions including publication in the Forward Plan (see CPR 1.22.4).
- 6.2.4 Cabinet has power to extend the contract under CPR 1.22
- 6.2.5 Further legal implications are contained in Part 2 of the report.

(Legal imps prepared by MOC on 6 December 2018 based on a report circulated on 4 December 2018).

6.3 Property Implications

There are no Property Implications.

7 KEY RISKS

7.1 Please see Part 2 of this Report.

8 IMPACT ON COUNCIL PRIORITIES – CREATING A LIFETIME OF OPPORTUNITIES IN ENFIELD

8.1 Good homes and well connected communities

8.1.1 The Integrated Sexual Health Community Services Contract ensures a Hub and Spoke model of service delivery. The Hub at Silverpoint is based in Upper Edmonton, N18 and area of high health need whilst the Spoke in the Town Clinic in EN2 provides accessible health interventions in the heart of Enfield. An extension to this Contract will ensure continuity of service provision providing residents with access to high class quality service provision in Borough to address their sexual health and reproductive needs.

8.1.2 The location of the two clinics will ensure more people in the community will have access to an integrated sexual health treatment service in a choice of settings to improve their health in more appropriate and cost effective community settings.

8.2 Sustain Strong and Healthy Communities

8.2.1 The Integrated Sexual Health Community Services Contract will continue to support multi-agency working, the Clinic at Silverpoint is currently co-located with a GP Practice ensuring that each service is working to support the health needs of the local population.

8.2.2 The Hub and Spoke model across the two sites: Enfield Town and Upper Edmonton will continue to ensure ease of access across the Borough. This seven day service will offer access to new patients, who previously may have chosen to access services in inner London clinics back in borough as part of the increased performance requirements of the extended Contract.

8.2.3 The Hub Clinic will increase joint work with local partners including Pharmacists, Community HIV support Services, Drug and Alcohol Services, other GP practices and young people's services including those working with gang members, providing an opportunity of joint

working. Sex workers within the Fore Street corridor will be supported through targeted outreach and encouraged to engage in these clinical services at Silverpoint.

8.3 Build our Economy to create a thriving place

8.3.1 The proposed increase in performance across the two year extension period of the Contract will ensure more people in the community are given access to integrated sexual health treatment in more appropriate and cost effective community settings.

9 EQUALITIES IMPACT IMPLICATIONS

An Equalities Impact Assessment was undertaken to inform the previous Integrated Sexual Health Commissioning intentions. The findings and recommendations from this are current to this process and have been utilised accordingly.

Sexual health issues disproportionately affect those experiencing poverty and social exclusion resulting in poor outcomes for the individuals and their families. The Hub Clinic at Silverpoint and Spoke at Enfield Town will work towards increasing service user accessing clinics within the Borough, as part of this contract extension and will ensure greater access for those target populations in need by offering locations with good transportation links and ease of access.

10 PERFORMANCE AND DATA IMPLICATIONS

10.1 The extension of the Integrated Sexual Health Community Services contract for a further two years will be subject to robust contract monitoring processes for service delivery and service quality. The principal focus will be accessibility and increase in service user numbers in Borough, as well as increased STI and HIV testing, prevention and outreach ensuring that all members of this Borough's diverse population receives equal, quality treatment and support for all their sexual health needs.

10.2 Regular contract monitoring will continue to be undertaken and audits will be conducted to ensure the service is compliant with national and local clinical guidelines including NICE guidance and use of Patient Group Directions (PGDs).

10.3 Data from January 2018 to December 2018 shows that there is already an upward trend in attendances at Enfield Sexual Health services:

GUM Activity	Jan - March 2018	April - June 2018	July - Sept 2018	Oct - Dec 2018	Total
Town Clinic Total GUM attendance	2,280	2,390	2,372	2,022	9,064
Silverpoint Clinic Total GUM attendance	654	1,307	1,335	1,734	5,030
Total GUM attendances	2,934	3,697	3,707	3,756	14,094
Family Planning Activity	Jan - March 2018	April - June 2018	July - Sept 2018	Oct - Dec 2018	Total
Town Clinic Total FP attendance	1,071	621	540	566	2,798
Silverpoint Total FP attendance	227	476	344	408	1,455
Total FP attendance	1,298	1,097	884	974	4,253
Total EISH attendance (GUM+FP)	4,232	4,794	4,591	4,730	18,347

*EISH – Enfield Integrated Sexual Health Service

**Total GUM attendances include GUM new attendances, GUM follow-up and telephone consultations

10.4 A revised KPI dataset will be implemented to monitor monthly performance as part of contract monitoring of NMUH and as back-up data for payment of invoices in relation to the Sexual Health contract. NMUH are also expected to:

10.4.1 Generate quarterly data extract of all patient attendances and associated diagnoses and services at GUM and non-GUM clinics in accordance with Public Health England Genitourinary Medicine Clinic Activity Dataset (GUMCADv2¹);

10.4.2 Utilise Sexual and Reproductive Health Activity Dataset (SRHAD) to capture contraception and other sexual and reproductive health activities;

10.4.3 Following all new HIV diagnosis, NMUH is required to generate a data extract to the HIV and AIDS Reporting Section (HARS) in Public Health England;

10.4.4 The completion of the Chlamydia Testing Activity Dataset (CTAD) is mandatory for all NHS and NHS-commissioned chlamydia testing carried out in England. Whilst CTAD is submitted by laboratories, it is the responsibility of NMUH to ensure the core CTAD data requirements are provided to the laboratory for each chlamydia test.

10.4.5 SRHAD and HARS, together with GUMCADv2 will form the basis for a standardised sexual health dataset collected from the Borough's sexual health clinic settings (plus CTAD from laboratories).

¹ PHE Genitourinary Medicine Clinic Activity Dataset (GUMCADv2) Guidance to Clinic Staff and Technical guidance and specification for data extract can be found: <http://www.hpa.org.uk/gumcad>

10.4.6 Quarterly GUMCADv2 and SRHAD data will be inputted by NMUH for the Hub and Spoke Clinics with analysis from PHE enabling informed commissioning decisions relating to GUM attendances, activity and STI trends.

10.4.7 All GUM activity within Borough will be recorded onto Pathway Analytics as part of this extended contract.

10.4.8 GUM activity data will be monitored by London Borough of Enfield. This includes activity reports for GUM attendances locally and out of borough together with a finance report on baseline costs and any variance in relation to monthly activity

11 HEALTH AND SAFETY IMPLICATIONS

11.1 NMUH are responsible for executing H&S guidelines.

12 HR IMPLICATIONS

12.1 There are no HR Implications.

13 PUBLIC HEALTH IMPLICATIONS

Good sexual health is an important part of people's lives, fundamental to the health and wellbeing of the individual and has obvious implications for the society. It requires a positive and respectful approach to sexuality and sexual relationships. Good service provision supports this through control of fertility and of sexually transmitted infections (STIs).

Given the financial implications of sexual health to Council budgets it is important to note the need for effective commissioning of services to meet both sexual health and financial needs. This contract should help to secure both.

It is anticipated that by increasing the number of GUM in-borough attendances that not only will this contract reduce the borough's carbon footprint (climate change has been described as the greatest public health challenge of the 21st century) but also that the needs of the borough's diverse community will be better served, particularly the young and less affluent populations who may be both less able to travel and more sexually vulnerable.

Background Papers

None