

EXECUTIVE 16th February 2023

Report Title	Public Health & NHSE Integrated Sexual Health and HIV services
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Lead Member	Councillor Helen Harrison – Executive Member for Adults, Health and Wellbeing

Key Decision		□ No
Is the decision eligible for call-in by Scrutiny?	⊠ Yes	□ No
Are there public sector equality duty implications?	☐ Yes	⊠ No
Does the report contain confidential or exempt information (whether in appendices or not)?	☐ Yes	⊠ No
Applicable paragraph number/s for exemption from publication under Schedule 12A Local Government Act 1972		

List of Appendices

None

1. Purpose of Report

- 1.1 The purpose of this document is to provide an update on the Northamptonshire Integrated Sexual Health Service (NISHH) contract and to seek approval to extend for 1+1 years in line with the current option to extend clause in this contract.
- 1.2 North Northamptonshire Council (NNC) currently has a contract in place with NHS England, through a Section 75 (S75), for the delivery of sexual health and HIV services. The service is a mandatory service funded through the Public Health ring-fenced grant. The current service is provided by Northamptonshire Healthcare NHS Foundation Trust (NHFT), GPs, and Pharmacies across the county, as an open access service. North Northamptonshire Council is holding the commissioning responsibility for this service on behalf of West Northamptonshire Council (WNC). There is one contract covering both authorities.

1.3 This report seeks approval from the Executive to delegate authority to the Executive Member for Adults, Health and Wellbeing in consultation with the Council's Director of Public Health (DPH). The authority is required to extend the existing Section 75 agreements with NHS partners from April 2023 to March 2025.

2. Executive Summary

- 2.1 The report provides summary information on the progress so far with the integrated approach for Sexual Health and HIV services and options for future arrangements.
- 2.2 The NISHH initial contract period commenced on 1st April 2019 and is due to expire on 31st March 2023. The service currently covers both North and West Northamptonshire. The Provider is Northamptonshire Healthcare NHS Foundation Trust (NHFT). A similar report to approve the extension of the sexual health service is being prepared by West Northamptonshire Council's DPH for presentation at their Cabinet in February 2023.
- 2.3 The contract has a two-year option to extend which would subsequently end this arrangement on 31st March 2025. Extending this contract for a further 2 years would incur a total cost of £18.512m. The contribution from NHS for the 2-year extension would be £8.934m. The remaining contribution from the local authorities would be £9.578m. NNC's contribution value (48.6%), equates to £4.655m. The residual amount £4.923m would be contributed by WNC as per their contribution value (51.4%). The Integrated Sexual health contract value was approved by Northamptonshire County Council (NCC) Cabinet in 2017.
- 2.4 Work has begun with the service to review the areas that require further development and improvement such as Young People's sexual health outreach clinics, and to refresh the current performance monitoring schedule (matching these to the new national service specification which is being updated against national guidance and will include targets/baselines). Service improvement plans have been introduced to closely monitor for improvement in activity.
- 2.5 Evaluation frameworks will be introduced to measure the impact of the service, and this will be benchmarked against regional and statistical neighbours. This work will also inform a more strategic vision.

3. Recommendations

- 3.1. It is recommended that the Executive:
 - a) Delegate authority to the Executive Member for Adults Health and Wellbeing in consultation with the Director of Public Health and the Executive Director of Finance and Performance to extend a Section 75 agreement (or equivalent public sector agreement) for up to two years with

- partners, NHS England, to jointly commission the Integrated Sexual health and HIV service from April 2023 March 2025.
- b) Agree to extend the current Northamptonshire Integrated Sexual Health and HIV contract with Northamptonshire NHS Foundation Trust (NHFT)

3.2. Reason for Recommendations:

- The recommended course of action is the most cost-effective and likely to match future services with the changing profile of North Northamptonshire's population
- Accords with legislation or the policy of the Council
- Enables development of the previous decisions of Northamptonshire County Council in September 2018,
- An extension of the NISHH contract with NHFT will provide time to undertake a needs assessment and benchmarking of the service and introduce new KPI's and targets required to meet the new and emerging needs of the population, identified through this process
- 3.3 Alternative Options Considered The options available to North and West Northamptonshire are as follows:
 - a) Extend the current contract with NHFT. This will provide time to undertake a needs assessment and a benchmarking exercise to better understand the emerging needs of the local population. The KPI's and targets would be updated through a contract variation to ensure the service is fit for purpose and delivering value for money while meeting local need.

This will also give time to understand how services have changed and how the learning can be further used to inform future re-commissioning of the new sexual health service in 2025 in line with the wider transformation and strategic aims.

Give time for the current Provider to reset and recover from the COVID-19 pandemic

b) Do not extend the contract, and reprocure the service – the risk is that this would not be completed in time, and risk service disruption.

The transformation and strategic ambitions are still being refined and the risk is that the intentions may not be fully embedded in the new service design for 2023.

The recommendation is option A. This would provide consistency in provision, enabling NISHH to fully reset and recover. It will enable the development of robust performance/quality monitoring and to evaluate/inform future service

delivery. This option will provide time in considering the wider transformation including fitting the ICS agenda into future recommissioning

4. Report Background

- 4.1. In 2017, Northamptonshire County Council (NCC) gave approval for Section 75 arrangements with NHS England (NHSE) to commission an Integrated Sexual Health Service which offers preventative, diagnostic and treatment services, including contraceptive and sexually transmitted infection services and diagnosis of HIV and to improve equity of access across the county.
- 4.2. The Council currently has a contract in place with NHS England through a Section 75 agreement (s.75).
- 4.3. The Integrated Sexual Health and HIV Service is a mandated service funded through the Public Health ring-fenced grant and is provided by Northamptonshire Healthcare NHS Foundation Trust (NHFT), GPs, and Pharmacies across the county. It is an open access service.
- 4.4. The Integrated Sexual Health Service is funded by both North and West Northamptonshire Councils. The annual contract value is: -
 - £3,712,000 for Integrated Sexual Health Service (ISHS) delivered by NHFT
 - £550,000 for Primary care delivery of Long-Acting Reversible Contraception (LARC) services.
 - £15,000 for Emergency Hormonal Contraception (EHC) supplied by Pharmacies
 - £15,000 for HIV testing supplied by Preventx
 - £ 122,000 Pre-exposure prophylaxis (PreP)
 - £375,000 Out of area activity

Total £4,789,000

NHS budget for HIV treatment and Care is £4,467,000.

The total annual service contract is £9,256,000.

- 4.5. The contract was awarded in 2019 by Northamptonshire County Council (NCC) and contracts for all these services end on 31st March 2023.
- 4.6. The Integrated Sexual Health Service commissioned by the Council includes prevention and screening for HIV, however HIV treatment services are commissioned by NHS England. The NHS funds £4.467m per year for HIV treatment and has a contract with NHS Foundation Trust until 31st March 2023.
- 4.7. HIV treatment services are currently delivered by NHFT, in full alignment (staff, accommodation and reporting systems) with the Integrated Sexual Health Services commissioned by the Council. NHSE and NCC jointly prepared a

- service specification and opened the tender for this service in February 2018, and the new service launched on 1st April 2019.
- 4.8. Disruption of this existing alignment is expected to increase costs, impact on the recruitment and retention of high-quality clinical staff and reduce accessibility for service users with the subsequent potential impact of increasing the numbers of people with HIV who access treatment at a late stage of disease progression.
- 4.9. Approval is now sought for delegated authority to be given to the Executive Member for Adults Health and Wellbeing in consultation with the Director of Public Health and the Executive Director of Finance and Performance, to extend the existing s.75 agreements with NHS partners to March 2025. This will enable the needs assessment and benchmarking to take place, and for longer-term commissioning options to be explored. The Council currently commissions this service on behalf of West Northamptonshire Council (WNC) too.
- 4.10. The first year of the extension will allow the Council and the Northamptonshire Integrated Care system to review the profile of need in North Northamptonshire for Sexual Health and HIV Service, as well as to creatively look at delivery options. The extension will deliver a procurement or other delivery option. It should not be assumed that the existing NHFT arrangements will continue, although this does remain an option. Possible replacement of existing services arrangements would require a procurement or related process.
- 4.11. This longer-term contract will continue to provide current services, and allow time to develop and transform services, with the aim to increase interest from the market, as well as obtain better value for money. It will also provide stability for service users, for whom trust, and confidentiality, are very important.
- 4.12. Under the s.75 there are opportunities for improved joint working. This will focus on prevention, transformation of service delivery, and lead to more effective and sustainable outcome focused contracts and services.
- 4.13. Building on existing organisational and policy arrangements with commissioning and provider organisations would be the least disruptive option in terms of organisational change. This will allow the Council to continue using existing mechanisms to promote better integration of Sexual Health services while the development of wider joint commissioning plans takes place.
- 4.14. The extension is sought for the delivery of the services and is covered by the original and current overarching NHS section S75 agreement entered into between the Council and NHFT (Northamptonshire Healthcare NHS Foundation Trust). As a result, this does not impinge on public procurement rules. The terms and conditions of the original contract will continue to apply subject to any variations agreed by the parties. A letter of extension is sufficient to formalise the two years (1+1) contract extension between the parties.

4.15. Performance

NISHH performance data for 2022/23 tells us that:

During 2022/23 the Service was available to the 3,014 residents (age 15 and above) of the North Northamptonshire area, and has provided

- All people (100%) accessing sexual health service are being offered an appointment, or walk-in, within 48 hours of contacting the provider
- All people (100%) accessing the sexual health service for emergency contraception have been offered Emergency Hormonal Contraception (EHC)
- There is an increase in the numbers of people accessing the service.
 This may be due to the success of non-face to face contacts. The service is now seeing more people than pre COVID-19 pandemic.
- Work to address areas of poor performance is mentioned in section 2.4.

Key Integrated Sexual Health service metrics	England 2021/22 (latest comparator data)	NNC 2021/22	NNC CIFPA neighbours	Trend
HIV - Among the sexual health service (SHS) patients the percentage tested from North Northamptonshire who were eligible to be tested for HIV in 2021.	45.8% in England.	38.8%	n/a	There is a decreasing/getting worse trend over the past five years.
The prevalence of diagnosed HIV per 1,000 people aged 15-59 years in 2019, is below the rate in England but above the CIPFA nearest neighbour rate.	2.32	2.01	1.59	No significant change over the past five years.
The number of new HIV diagnoses among people aged 15 years and above in North Northamptonshire in 2021.	4.8 per 100,000	20 total number (5.7 per 100,000)	n/a	No significant change over the past five years.
In North Northamptonshire, in 2019-21, the percentage of HIV diagnoses made at a late stage of infection (CD4 count ≤350 cells/mm3 within 3 months of diagnosis) was worse than in England.	43.4%	59.1%,	n/a	Slight improvement on the previous year of 60.7.
Chlamydia- Screening - Young people in North Northamptonshire aged 15 to 24 attending sexual health services (SHS) and community-based settings screened for Chlamydia in 2021,	14.8%	15.0%	13.4%.	There is a decreasing/getting worse trend over the past five years.

Key Integrated Sexual Health service metrics	England 2021/22 (latest comparator data)	NNC 2021/22	NNC CIFPA neighbours	Trend
is similar to the England average and higher than the CIPFA nearest neighbours' average.				
Chlamydia detection rate per 100,000 young people aged 15-24 years in North Northamptonshire in 2021, is slightly below the rate for England.	1,334 per 100,000	1,231 per 100,000	n/a	n/a
The total abortion rate per 1,000 women aged 15-44 years in 2020 in Northamptonshire, higher than the England rate and the CIPFA nearest neighbours' rate.	18.9 per 1,000	was 20.7	17.3 per 1,000	There is an increasing/getting worse trend over the past five years.
Under-18s Conception rate in North Northamptonshire 2020, for girls aged 15-17 years, is similar to the rate in England.	13.0 per 1,000	13.7 per 1,000	n/a	n/a
Under 18 conceptions led to an abortion in North Northamptonshire in 2020, lower than in England and higher than 50.4% for CIPFA nearest neighbours. No significant change over the past five years.	53.0%	51.8%	50.4%	n/a

5. Issues and Choices

- 5.1. The existing Section 75 arrangement for Sexual health and HIV services ends in March 2023. It is proposed that the integrated commissioning approach through the S75 agreement between the two councils and NHSE will be extended for up to two years, and that services described above under this arrangement continue to be delivered during that period.
- 5.2. During the period of the extension commissioners will be undertaking a bench marking exercise against neighbouring councils and a needs assessment. Following these options will be explored for the development of a transformed model of service provision and how this can be achieved.

- 5.3. The option to end the existing services in March 2023 is extremely risky as it could result in significant loss of essential services.
- 5.4. Delivery of other options, including bringing services in-house or running a procurement would not be possible before the end of the current arrangement. The proposals here are for these options to be modelled during the period of the extension.

6. Next Steps

- 6.1. Confirm agreement to act on the proposed continuation of contract arrangements with the NHSE.
- 6.2. Use the opportunities that strategic commissioning affords to work with partners to improve the effectiveness and efficiency of an integrated sexual health service.

7. Implications (including financial implications)

7.1. Resources, Financial and Transformation

7.1.1. The financial implications are set out in the following tables and the costs will be met from within the existing Public Health budget.

Funding Allocation (2 years)

Contract Values (2 years)	£000's
NHSE	8,934
NNC (Contribution Value 48.6%)	4,655
WNC (Contribution Value 51.4%)	4,923
Total	18,512

Contract Costs

On-going costs (revenue) approx Sexual health services	2023/24 £000's	2024/25 £000's
NNC: 48.6% (£2,327)	2,327	2,327
WNC 51.4% (£2,462)	2,462	2,462
Cost of NHFT Sexual Health services	3,712	3,712
Emergency Hormonal Contraception (EHC) - maximum	15	15
Long-Acting Reversible Contraception (LARC) - maximum	550	550
HIV Screening	15	15
Pre-exposure Prophylaxis (PreP)	122	122
Out of area activity	375	375
Funding by Public Health Budget	4,789	4,789
HIV Treatment and care funded by NHSE	4,467	4,467
Total on-going costs (revenue)	9,256	9,256

7.1.2. There has been no request from the provider for an uplift in contract value over the 4-year period. Within the integrated sexual health contract there is a gainshare clause which enables the provider to receive fifty percent of the underspend from the out of area sexual health budget to re-invest in the service. An example of this is introducing HIV testing in acute services and an investment in a new laboratory STI testing machine to provide quicker results to clients. This has supported service developments benefiting service users and the service.

7.2. Legal and Governance

- 7.2.1. Section 75 of the NHS Act 2006 contains powers enabling NHS bodies to exercise certain local authority (LA) functions and for LAs to exercise various NHS functions. In view of the risks associated with taking a unilateral approach to recommissioning, this report seeks approval to continue the arrangement with NHS England using s75 of the NHS Act 2006 for the commissioning of an integrated open access sexual health and HIV treatment and care service.
- 7.2.2. In order to have the power to enter into an agreement under s75 of the National Health Service Act 2006, the Council must have complied with a number of statutory pre-conditions.
- 7.2.3. These are set out below and will need to be met before the s75 can be entered into.
 - (i) The parties must be able to show that such arrangements are likely to lead to an improvement in the way in which the NHS functions and the

Council's health-related functions are exercised. The s75 Agreement and contractual arrangements will enable the continuation of an integrated open access sexual health and HIV treatment and care service.

- (ii) The parties must consult such persons as appear to the NHS body and the local authority to be affected by such arrangements. The s75 agreement governs the formal responsibilities between the Council and NHS England as to who commissions the services to be delivered.
- 7.2.4. In addition, statutory Regulations set out certain matters that must be contained in any s75 Agreement as follows:

The agreed aims and outcomes;

- The payments to be made between LAs and NHS bodies and how those payments may be varied;
- Both the NHS functions and health-related functions to be exercised and the persons in respect of whom and the kinds of services in respect of which such functions may be exercised;
- The staff, goods, services or accommodation to be provided by the partners;
- The duration of the arrangements and the provision for the review or variation or termination of the arrangements;
- The arrangements for monitoring the exercise of the functions; and
- Where pooled funding arrangements are to be set up, further detailed requirements apply. Not applicable for this s75 agreement. These requirements will be met by the proposed extension of the s75 Agreement.

7.3. Relevant Policies and Plans

- 7.3.1. The Council's vision is to make North Northamptonshire a place where everyone has the best opportunities and quality of life. This is achieved through:
 - Active fulfilled lives
 - Bigger brighter futures
 - Safe and thriving places
 - Green sustainable communities
 - Connected communities
 - Modern public services

This initiative specifically delivers Active fulfilled lives, bigger brighter futures and safe and thriving places by ensuring that:

- People of all ages are safe, protected from harm and able to live happy, healthy and independent lives in our communities.
- People have the information and support they need to make healthy choices and achieve wellbeing.
- People achieve economic prosperity, through training and skills development.

- Communities thrive in a pleasant and resilient environment.
- Resources are utilised effectively and efficiently, in coordination with partners and providers.

7.4. **Risk**

7.4.1. There are several risks identified in the table below.

Risk	Risk Rating
Failure to deliver sexual Health services beyond March 2023 will result in a failure of the Council to provide mandatory services.	Red
Failure to deliver these services beyond March 2023 will result in a significant impact on the population sexual health including unplanned pregnancy, sexually transmitted infections and HIV.	Red
Failure to retain full integration of ISHS with HIV treatment services will negatively impact uptake of treatment and increase untreated HIV prevalence in the population.	Amber
Separation of ISHS and HIV Service delivery will increase costs, impact on recruitment and retention of skilled staff.	Amber
Failure to maintain sexual health services beyond March 2023 will lead to increased future costs due to North Northamptonshire residents accessing out of area services.	Amber
If contract is extended, service development may be delayed as market has not been tested and workforce remains a challenge	Amber
Instability of the contract may lead to decline in staff capacity and provider performance.	Green

7.5. **Consultation**

- 7.5.1. This report was produced for both Councils and submitted through the established governance arrangements.
- 7.5.2. There are clear national guidelines for the delivery of the clinical elements of an integrated sexual health service. Consultation on the delivery model to ensure access for high-risk groups and communities will be a requirement of the new contract.

7.6. Consideration by Executive Advisory Panel

7.6.1. The Integrated Sexual Health business case was not presented to the EAP.

7.7. Consideration by Scrutiny

7.7.1 This report was not considered by Scrutiny.

7.8. Equality Implications

- 7.8.1. Equality Impact Assessments will be undertaken for the purposes of recommissioning and procurement.
- 7.8.2. There are no EqIA implications for this proposal, although we expect there to be positive benefits from any new elements to the service.

7.9. Climate and Environment Impact

7.9.1 During the extension period and in preparation for new arrangements from 2025 climate impact will be a key factor in consideration of service delivery options.

7.10. Community Impact

7.10.1 The report considers the health and wellbeing of North Northamptonshire resident population. Stability in the Integrated Sexual Health Service will have a positive impact on local residents as this will reduce the need for them to access services out of the county.

7.11. Crime and Disorder Impact

7.11.1 There are no Crime and Disorder implications in this paper.

8. Background Papers

8.1 NHS England Formal Midlands Acute Specialised Commissioning Group (FMASCG) Paper