Report to Rutland Health and Wellbeing Board

Subject:	Rutland Sexual Health Needs Assessment (Executive Summary) and Strategy
Meeting Date:	26 th January 2016
Report Author:	Vivienne Robbins/Mike Sandys
Presented by:	Vivienne Robbins/Mike Sandys
Paper for:	Approval

Context, including links to Health and Wellbeing Priorities e.g. JSNA and Health and Wellbeing Strategy:

The Rutland sexual health needs assessment (executive summary) triangulates national and local policy with quantitative and qualitative data to provide a comprehensive understanding of the needs, demands and supply of sexual health services across Rutland. The needs assessment produces a number of recommendations for action. The executive summary will form a chapter of the Rutland Joint Strategic Needs Assessment.

The SHNA recommendations have been categorised and translated into a draft Rutland Sexual Health Strategy 2016-19. This will be need further public and stakeholder consultation including submission to Health Overview and Scrutiny committee and Health & Wellbeing Board before approval by Cabinet in early 2016. A detailed action plan will then be developed following results from the consultation and work with officers for wider implementation across Rutland County Council.

N.B. The executive summary is a Rutland specific documents produced from a more detailed Leicestershire and Rutland Sexual Health Needs Assessment. The full SHNA report is nearly 150 pages, hence is available on request.

Financial implications:

The results of the SHNA and draft strategy propose changes to current sexual health prioritises, commissioning intentions and service provision. Specific service implications include;

- Working with local clinical commissioning groups (CCGs) and NHS England commissioners to reduce fragmentation across the system. Developing a bi-annual sexual health commissioners meeting.
- Agree a local tariff arrangement for out of area specialist sexual health services in particular Peterborough services.
- Increasing the role of primary care in delivering uncomplicated sexual health services (in particular contraception.)
- Reduction in opportunistic chlamydia screening and conversion into a full

online STI screening service.

- Providing parity across LLR for young people's sexual health services including development of an LLR C-Card (condom distribution scheme) and increasing Rutland access into the core integrated sexual health service.
- Increased focus on groups at high risk of poor sexual health especially on men who have sex with men.
- Increased focus on relationship and sex education across Rutland schools, including utilisation of the Leicestershire and Rutland RSE toolkit.
- Increased access to HIV testing for at risk groups (including men who have sex with men).

Recommendations:

That the board are recommended to:

Comments from the board:

- 1. Approve the Rutland SHNA and comment on the proposed recommendations.
- 2. Support implementation of the recommendations across portfolio areas (in particular CCG support, children's, substance misuse etc.)
- 3. Review the Rutland Sexual Health Strategy and provide feedback on the current draft.
- 4. Approve the Sexual Health Needs Assessment and draft strategy for public consultation.

Strategic Lead:	Mike Sandys/ Vivienne Robbins				
Risk assessment:					
Time	M	Sexual Health Strategy due to go to Cabinet for formal sign off in March 2016. A public consultation will therefore need to take place early 2016.			
Viability	M	Strategy will be implemented using a programme approach utilising existing task and finish groups. An LLR sexual health commissioners meeting will be established to coordinate commissioning decisions. Key risk will be wider stakeholder engagement in delivery of the strategy.			
Finance	M	See financial implications above. Sexual health is a significant proportion of the public health grant, this strategy aims to reduce costs in the specialist service.			
Profile	М	Strategy will impact on neighbouring local authorities (for example jointly commissioned			

specialist service with Leicester City and

Equality & Diversity	L	Leicestershire County), clinical commissioning groups and NHS England. A number of at risk groups have been specifically reviewed as part of the SHNA and a key recommendation has been to ensure all sexual health services regularly complete an equality impact assessment. However a full equality impact assessment will be completed as part of the wider strategy consultation process.				
Timeline:						
Task		Target Date	Responsibility			