

## SCRUTINY PANEL

18 February 2016

# SEXUAL HEALTH NEEDS ASSESSMENT AND DRAFT RUTLAND SEXUAL HEALTH STRATEGY 2016-19

### Report of the Director of Public Health

Strategic Aim:	The overall mission of the Rutland Sexual Health strategy is, 'Empowering the population of Rutland to make informed, positive choices about their relationships and sexual health.'		
Exempt Information	No		
Cabinet Member(s) Responsible:	Councillor Richard Clifton, Portfolio Holder for Health and Adult Social Care		
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Ward Councillors			

### DECISION RECOMMENDATIONS

That the Panel:

1. Note the Rutland SHNA and comment on the proposed recommendations.
2. Endorses 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.

### 1 PURPOSE OF THE REPORT (MANDATORY)

- 1.1 To update scrutiny on the recommendations and implications of the Rutland Sexual Health Needs Assessment (Appendix A) and draft Sexual Health Strategy 2016-2019 (Appendix B).
- 1.2 To gain feedback from scrutiny on the draft Rutland Sexual Health Strategy as part of the current sexual health consultation. Available at [http://www.rutland.gov.uk/health\\_and\\_social\\_care/sexual\\_health\\_consultation.aspx](http://www.rutland.gov.uk/health_and_social_care/sexual_health_consultation.aspx) until 15<sup>th</sup> March 2016.

## 2 BACKGROUND

- 2.1 The sexual health needs of the population are evolving. Over the past few decades there have been significant changes in relationships and how people live their lives including personal attitudes and beliefs, social norms, peer pressure, confidence and self-esteem, misuse of drugs and alcohol, coercion and abuse.
- 2.2 Although sexual relationships are essentially private matters, good sexual health is important to individuals and to society. The World Health Organisation (WHO), 2002 defines sexual health as ‘... a state of physical, emotional, mental and social well-being in relation to sexuality.’
- 2.3 Sexual ill health can affect all parts of society – often when it is least expected. Investment in sexual health not only improves the overall health of the population, it is also cost effective. The consequences of poor sexual health cost the NHS in 2010 an estimated £193million in unintended pregnancies and in 2012/13 approximately £630million in HIV treatment and care. National evidence also suggests that:
- Every one pound invested in contraception saves £11.09 in averted negative outcomes;
  - An increase in long acting reversible contraception (LARC) usage could save £102million; and
  - Increasing HIV testing among Men who have sex with Men and black African communities in England would prevent 3,500 cases of HIV transmission within five years and save £18million in treatment costs per year.
- 2.4 A comprehensive Leicestershire and Rutland Sexual Health Needs Assessment was completed in autumn 2015. The Rutland executive summary is attached as Appendix A. It confirms that good progress has been made on key sexual health indicators and on improving sexual health outcomes across Rutland. However, Rutland has an ageing and increasing population and sexual health services must respond. It is therefore important to consider how services evolve to meet these changing needs across the life course.
- 2.5 The proposed Rutland Sexual Health Strategy uses the latest evidence from the Sexual Health Needs Assessment (SHNA) to take stock of progress made so far and provides key strategic priorities for the next three years to further improve sexual health services across Rutland.

## 3 OVERVIEW OF THE DRAFT STRATEGY

- 3.1 The draft Rutland Sexual Health Strategy 2016-19 is attached to this report (Appendix B). This document outlines the eight key priorities for improving sexual health services and population outcomes across Rutland. These are briefly set out below:
- 3.1.1 **Coordinated approach to sexual health commissioning and partnership work.** Streamlining commissioning intentions across the system (including Peterborough) to ensure seamless patient pathways, improved quality of service and identify cost efficiencies across the system;
- 3.1.2 **Develop a highly skilled local workforce.** Rutland has previously experienced

recruitment problems within the service. It is therefore important, to develop both the specialist and non-specialist workforce, to make sexual health services in across Rutland an attractive place to work and progress;

- 3.1.3 **Strengthen the role of primary care.** General practices deliver the majority of contraception across Rutland. These services are often more accessible to the rural Rutland population than the specialist sexual health services, which are experiencing increased demand. Hence, there is a need to further equip the primary care workforce to deliver more uncomplicated sexual health services in the future;
- 3.1.4 **Coordinated, consistent sexual health communications.** Consistent communications have a greater impact on the population, therefore services and commissioners will develop communication approaches in partnership to ensure these have the greatest effect on population attitudes and access to sexual health services;
- 3.1.5 **Support schools to deliver high quality relationships and sex education (RSE).** High quality RSE is critical to empowering young people to have informed, consenting, positive relationships. Further work will be completed to build on the current Leicestershire and Rutland RSE toolkit.
- 3.1.6 **Utilise new technologies to support sexual health delivery.** Rutland is a rural county, therefore sexual health services need to utilise the latest technologies to increase access to the population. This includes developing a risk assessed, full STI (sexually transmitted infection) screen and utilising communication advances in service delivery, advertisements and partner notification. New sexual health interventions will also be reviewed and implemented as appropriate;
- 3.1.7 **Increase access to sexual health improvement and HIV prevention to at-risk groups.** In Rutland men who have sex with men are the key group at greater risk of poor sexual health. Therefore access to HIV home and community testing will be investigated and targeted to these at risk populations;
- 3.1.8 **Increase links between sexual violence and sexual health services.** In recent years there has been increasing national impetus on sexual violence including child sexual exploitation and female genital mutilation. Sexual health services therefore need to further embed the sexual violence prevention agenda within their services.
- 3.2 The Strategy is arranged into six key sections, including an introduction, current sexual health progress, cross cutting themes, the strategic approach, key activities to deliver the approach and defining how the strategy will be performance monitored. Full details are given in Appendix B.

## **4 ORGANISATIONAL IMPLICATIONS**

- 4.1 The results of the SHNA and draft Strategy propose changes to current sexual health prioritises, commissioning intentions and service provision (including health promotion, relationships and sex education, contraception and STI screening and treatment). Specific service implications include:
  - 4.1.1 Working with local CCGs and NHS England commissioners to reduce fragmentation across the system (including links with Peterborough). Developing a bi-annual sexual health commissioners meeting.

- 4.1.2 Increasing the role of primary care in delivering uncomplicated sexual health services (in particular contraception).
- 4.1.3 Reduction in opportunistic chlamydia screening and conversion into a full online STI screening service.
- 4.1.4 Providing parity across Leicester, Leicestershire and Rutland (LLR) for young people's sexual health services including development of an LLR C-Card (condom distribution scheme) and increasing access into the core integrated sexual health service.
- 4.1.5 Increased focus on groups at high risk of poor sexual health, especially on men who have sex with men.

## **5 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS**

- 5.1 Sexual health services and commissioning has become fragmented following the implementation of the Health and Social Care Act 2012. Developing a sexual health strategy that is endorsed by key partners including Clinical Commissioning Groups (CCGs), NHS England, providers and service users will set an agreed direction for sexual health commissioning across Rutland. This will streamline commissioning intentions, improving patient pathways and quality of care. The Strategy will also be aligned with sexual health strategic priorities for Leicestershire County Council and Leicester City Council to provide a wider Leicester, Leicestershire and Rutland system approach.
- 5.2 Undertaking consultation on the draft Strategy will ensure it meets the needs of the local population and is aligned with other key stakeholders. The sexual health consultation provides an opportunity to ensure that all stakeholders are made aware of the draft priorities and given the opportunity to make comment upon these at an early stage.

## **6 BACKGROUND PAPERS**

- 6.1 Public Health England. Making It Work – A guide to whole system commissioning for sexual health, reproductive health and HIV. (2014).  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/408357/Making\\_it\\_work\\_revised\\_March\\_2015.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/408357/Making_it_work_revised_March_2015.pdf)
- 6.2 Department of Health. A Framework for Sexual Health Improvement in England. 1–56 (2013).  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/142592/9287-2900714-TSO-SexualHealthPolicyNW\\_ACCESSIBLE.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/142592/9287-2900714-TSO-SexualHealthPolicyNW_ACCESSIBLE.pdf)

## **7 APPENDICES (SIMPLY STATE IF THERE ARE NO APPENDICES)**

- 7.1 **Appendix A** Rutland Sexual Health Needs Assessment, Executive Summary, October 2015
- 7.2 **Appendix B** Draft Rutland Sexual Health Strategy 2016-19

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577. (18pt)

