HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker:	Executive Member for Public Health
Date:	3 October 2018
Title:	Level 2 Community Sexual Health and Influenza Immunisation Services
Report From:	Director of Public Health

Contact name:

Simon Bryant, Associate Director of Public Health

Tel: 02380 383326

Email: simon.bryant@hants.gov.uk

1. Recommendation(s)

1.1 That approval is given from the Executive Member for Public Health to spend in relation to level 2 Community Sexual Health and Influenza Immunisation services, up to a maximum value of £13,898,500 from 1 April 2019 with a maximum contract term of 7 years (5 years with an option to extend for a period or periods of up to 2 years).

2. Executive Summary

- 2.1. The current Approved List of qualified providers was established in 2016 in order to facilitate the commissioning and continued delivery of enhanced public health services across a large number of GP practices, community pharmacies and other qualified providers in Hampshire.
- 2.2. The current contracts held with providers on the Approved List expire on 31 March 2019.
- 2.3. A review of the services on the Approved List has been completed by the Public Health team and it has been identified that there is an ongoing need to commission the Long Acting Reversible Contraception service, the Emergency Hormonal Contraception service and the Influenza Immunisation service.
- 2.4. These services are required to be delivered at scale across a range of qualified, clinical providers, ensuring that the County Council has sufficient geographical coverage across Hampshire, to deliver improved public health outcomes for Hampshire residents.
- 2.5. The public health risks associated with not recommissioning these services include increased numbers and rates of unintended pregnancy, including teenage pregnancy, and increased morbidity and mortality arising from

seasonal influenza in older people and other vulnerable adults with care needs.

- 2.6. Chlamydia Screening and Chlamydia screening Kits & Condom services are now provided online through an alternative STI home sampling postal service), as part of the County Council's contract for Level 3 Integrated Sexual Health Services with Executive Member approval in January 2016.
- 2.7. Executive Member approval to procure and spend in relation to NHS Health Checks has already been granted. It is considered important that a standardised open procurement process is agreed across these services enabling qualified providers to apply once to provide one or all of the listed services, where applicable, at the same time.

3. Contextual information

Background

3.1. The current Approved List of qualified providers was established in 2016 in order to facilitate the commissioning and continued delivery of enhanced public health services across a large number of GP practices, community pharmacies and other qualified providers in Hampshire.

4. Overview of Services

4.1 Long Acting Reversible Contraception (LARC)

Long Acting Reversible Contraception (LARC) is a public health service which is commissioned by the Council in addition to the standard contraceptive services that are provided by GP practices under their GP contracts with the NHS. The service involves the fitting and removal of long-acting contraceptive coils and implants, which are the most effective and cost-effective methods of contraception, in order to reduce unintended pregnancy.

The service is an enhanced service that requires clinicians (doctors and/or nurses) to undertake additional training in order to obtain Letters of Competency to fit and remove these devices over and above their standard GP and/or nurse training. Due to the clinical nature of this service, the vast majority of providers of these services are GP practices.

The commissioning of contraception services is a mandated public health responsibility under the Health & Social Care Act 2012.

The approved list currently includes 102 qualified providers of the Long Acting Reversible Contraception Service, the majority being GP practices.

The annual spend for this service from the Public Health budget includes payments made to service providers based on the number of LARC devices fitted and removed by the provider plus payments made to Hampshire Clinical Commissioning Groups (CCGs) for the actual devices (prescribing costs).

4.2 Emergency Hormonal Contraception (EHC)

The Emergency Hormonal Contraception service is an enhanced public health service which improves population and geographical access to emergency hormonal contraception in community pharmacies for women at risk of unintended pregnancy. The service is provided in addition to the contraception services provided by GP practices and the Level 3 Integrated Sexual Health Service and is particularly targeted and marketed at young people in support of the Council's Teenage Pregnancy Strategy.

The commissioning of contraception services is a mandated public health responsibility under the Health & Social Care Act 2012.

The approved list currently includes 41 qualified providers of the Emergency Hormonal Contraception Service. Payments are made to service providers based on the number of EHC consultations delivered including the costs of the emergency hormonal contraception drugs issued, where clinically indicated.

4.3 Influenza Immunisation for qualifying frontline staff

The Influenza Immunisation service provides access to seasonal influenza immunisation in community pharmacies for qualifying frontline Hampshire County Council health and social care staff, staff in Registration Services and those in Emergency Planning roles. The service aims to increase the uptake of influenza vaccination in eligible Hampshire County Council staff who work with vulnerable / at risk clients in order to reduce the risk of serious morbidity and mortality arising from influenza. This service compliments the National Seasonal Influenza Immunisation Programme which targets cohorts in agreed clinical at risk groups. The approved list currently includes 49 qualified providers of this service. Providers are paid a fee for each eligible professional vaccinated.

5. Finance

- 5.1. These services are funded from the core Public Health specific grant. The current annual budget for the services included within this report totals £1.83m. The total budgeted value over seven years is £12.82m.
- 5.2. It should also be noted that there are further reductions required from the Public Health budget, over the next three years, in order to meet the reduced grant amount.
- 5.3. The maximum aggregated financial value requested for each service over the period of the contract term (5 years plus extensions of up to 2 years, i.e. a total maximum contract term of 7 years), is set out below:

Long Acting Reversible Contraception – £12.32m Emergency Hormonal Contraception – £1.54m Influenza Immunisation - £0.04m

- 5.4 The values included in 5.3 are based on the current agreed budgets for these services plus 10% contingency to accommodate for increases in activity within the approved sum. However it should be noted that the current activity levels are below the budgeted level by £0.22m. Whilst prudence has been applied to the amount within the approval request it is not anticipated that the spend on these services will reach the values included in 5.3.
- 5.5 It can be seen that the amount requested for approval exceeds the budgeted sum available. This reflects the need to retain flexibility over the Public Health budget over the timeframe of seven years, in particular as these services are activity based. However, in each of the given years the Public Health team will be required to only spend within the approved budget for each of these services.
- 5.6 The paper seeks approval from the Executive Member for Public Health to spend in relation to the services up to a maximum value of £13.90m.

6. Performance

- 6.1. Services will be developed in line with the Hampshire County Council Performance Framework which is in line with the Public Health Outcomes Framework (PHOF).
- 6.2. The procurement of these services will help ensure continued service delivery and continued improvement in service outcomes and enhanced performance measures including standardised contracts and specifications focused on outcomes.
- 6.3. The contract term will help deliver a continuous delivery of improvement throughout the life of the contract building stronger partnerships which is expected to deliver better outcomes for our residents.
- 6.4. All contracts will be performance managed in line with HCC processes.
- 6.5. Delivery will be against specifications for each service which will be defined by the various strategies and ultimately the PHOF.

7. Consultation and Equalities

- 7.1. Within the services being proposed there will be positive impacts for young people, women, people with disabilities, people who are from certain Black and minority ethnic groups: and people considered 'at risk'.
- 7.2. LARC and EHC are both services for women of reproductive age in order to reduce unintended pregnancy. Both services are targeted and marketed at women at increased risk of unintended pregnancy. There is evidence that young women, women from certain Black and minority ethnic groups, women with substance misuse problems, women in contact with the criminal justice system and women living in areas of deprivation are all at increased risk of unintended pregnancy.
- 7.3. The Influenza Immunisation service is targeted at eligible Hampshire County Council health and social staff who work with vulnerable / at risk clients

- including older people and people with long-term health conditions and disabilities.
- 7.4. It is for the Executive Member as decision maker to have due regard to the need to: Eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act and advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 7.5. Refer to full Equality Statement in Integral Appendix B.

CORPORATE OR LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	no
People in Hampshire live safe, healthy and independent lives:	yes
People in Hampshire enjoy a rich and diverse environment:	yes
People in Hampshire enjoy being part of strong, inclusive communities:	yes

Other Significant Links

Links to previous Member decisions:			
Title Public Health Strategic Procurement Plan and Approvals https://www.hants.gov.uk/aboutthecouncil/councillors/meetings-archive/council-meeting-decision?item_id=5128	Reference 5128	Date 20 September 2013	
Public Health – Healthy Lifestyle Services procurement and Approved List of Providers https://www.hants.gov.uk/aboutthecouncil/councillors/meetings-archive/council-meeting-decision?item_id=6325	6325	27 January 2015	
Level 3 Sexual Health Services https://www.hants.gov.uk/aboutthecouncil/councillors/meetings-archive/council-meeting-decision?item_id=7133	7133	18 January 2016	
NHS Health Checks https://democracy.hants.gov.uk/ieDecisionDetails.aspx?ID=774		25 July 2018	

Direct links to specific legislation or Government Directives		
<u>Title</u>	<u>Date</u>	
Health and Social Care Act 2012 (s.12)http://www.legislation.gov.uk/ukpga/2012/7/section/12	2012	
The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 http://www.legislation.gov.uk/uksi/2013/351/part/2/made	2013	

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

<u>Document</u> <u>Location</u>
None

IMPACT ASSESSMENTS

1. Equality Duty

1.1. The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;

Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;

Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic:

Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;

Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionally low.

1.2. Equalities Impact Assessment:

An Equality Impact Assessment has been carried out:

http://documents.hants.gov.uk/equality-impact-assessments/as/Level2CommunitySexualHealthandInfluenzalmmunisationServices-EIA-110918.pdf

2. Impact on Crime and Disorder:

2.1. By definition, interventions considered to improve and protect the public's health are designed to support the citizen's of Hampshire to live safely and have improved health and wellbeing

3. Climate Change:

3.1. Consideration of climate change and its impacts on the population and its current and future public health forms part of the evidence informing interventions to improve and protect the public's health.

3.2. Services will aim to reduce the impact on climate change and increase accessibility for residents through provision from locations that are easily accessible by foot and by public transport.