



Modernising London's Sexual Health Services

The implementation of the London Sexual Health programme will change the way Londoners will access sexual health services in the future. This member briefing explores the aims and vision for the London Sexual Health programme and the progress made to date.

Background

Responsibility for many sexual health services moved to councils in 2013 as part of the transfer of public health responsibilities. This included a mandate to make provision for open access sexual health services for HIV testing, STIs and contraception. These mandated open access services are the focus of the London Sexual Health Programme. Other services that are also the responsibility of councils, such as sexual health promotion or enhanced sexual health services in primary care, are not covered by the programme.

Given the complex commissioning arrangements, boroughs, London Directors of Public Health and commissioners saw an opportunity to bring about transformative, evidence based change. This would not only maintain essential services, but provide new service offerings, help to improve sexual health outcomes and allow local authority commissioners to realise efficiencies.

Improving sexual health provision is particularly important in London because of the following issues which are specific to the capital:

- The prevalence of total diagnosed HIV in the capital is more than double the national average. In 2016, there were 37,000 Londoners with diagnosed HIV, and it is estimated that 10 per cent of Londoners with HIV remain undiagnosed.
- The rate of annual new diagnoses of STIs are double the national average, and there were 95,000 new diagnoses of the five most common STIs in 2016. Seventeen of the 20 authorities with the highest rates of STIs are in London.
- London's abortion rates are substantially above the national average, with a rate of 20.8 per 1,000 women aged 15-44 in 2016, compared with 16.7 for England as a whole.
- There are key inequalities in sexual health, particularly affecting young people and young adults, some BME communities, and gay, bisexual and other men who have sex with men.
- Sexual health interventions are highly cost effective, especially for contraception and interventions that prevent new HIV infections.

In 2015, London spent more than £140 million on sexual health services this includes the provision of Genito-Urinary Medicine (GUM) services, contraception and other related services. There has been an increase in some types of STIs over the last few years which could be due to a combination of factors such as changes in sexual behaviour, population growth, increased testing and more accurate tests. However, data in 2016 suggests that some STIs are declining, with an overall reduction of 5 per cent in STI diagnoses, including a 19 per cent fall in gonorrhoea cases. New HIV diagnoses also fell in London in 2016, with 1,958 in 2016 dramatically lower than the average 2,560 per year in London since the start of the decade. This trend is a positive one, and the fall in new HIV cases is unprecedented since the start of the epidemic in the early 1980s.

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Transformation objectives

In 2014, the London Sexual Health Transformation Programme was established to deliver a new collaborative commissioning model for open access sexual health services. Up to 32 London councils have been involved in the various work streams of the programme.

In April 2017, the programme moved from planning to the delivery phase, with the London Sexual Health Programme team hosted by the City of London on behalf of participating authorities. The team is continuing to work collaboratively with 30 London boroughs to implement a new model of sexual health services across the capital.

The overall objective of transformation is to support long-term clinically and financially sustainable services, able to meet the changing sexual health needs of Londoners and drawing on technological developments to modernise the ways in which services are available and used.

The programme's overall outcomes for services are:

- Increase uptake of long-acting reversible contraception, including for disadvantaged or under-served communities.
- Increase the uptake of HIV testing, reducing late HIV diagnoses and preventing new infections.
- Ensure timely results and follow-up for all STIs and improve immunisation, to help to reduce the risk of onward infections.
- Improve sexual health promotion, and uptake of sexual health interventions in vulnerable groups through targeted interventions and promotion, encouraging innovation.
- Help promote better health and wellbeing by linking with other services, such as drug and alcohol services and domestic violence services.
- Help address the wider social determinants of sexual ill health.

To deliver these objectives, the programme established three distinct work streams. These are the following:

- **Clinical specifications and standards.** Supporting sub-regional groups to re-commission face to face clinic services in a way that supports overall transformation objectives. The programme's Clinical Advisory Group has developed and agreed a London clinical specification for integrated sexual health services, based on national and evidence-based clinical and quality standards. Integrated sexual health services provide services for testing, diagnosis and treatment of STIs, testing and diagnosis of HIV, and the full range of contraception services. Integrated services are popular, especially with young people and younger adults, and are both effective and efficient.
- **Cross-charging.** The development of a new pricing mechanism (an Integrated Sexual Health Tariff) that supports implementation of integrated sexual health services, based on clinical pathways to meet needs. Thirty two boroughs have worked together to

develop this, in partnership with clinicians and other stakeholders.

- **Online.** To develop and commission a new London sexual health e-service, providing home self-sampling kits for HIV and STIs where clinically appropriate. Twenty seven boroughs have worked together to develop this service specification and have carried out a procurement process. The service will be convenient for service users, designed around the changing ways people access services, and cost effective for commissioners. The service has the potential to reach groups not currently in contact with services, as well as offering a convenient alternative for eligible current clinic users.

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Implementation

London boroughs, individually or working together as sub-regional groups, remain responsible for commissioning/procuring the most appropriate configuration of clinic provision in their area. Alongside these services, a new online service aimed towards asymptomatic service users has been commissioned across 27 boroughs in London. The City of London Corporation is the lead authority for the online contract. Another four councils are named in the online procurement, and are able to join the online service in the future if they so desire.

Although in some areas there may be changes in the number of locations where services are available, the overall programme will commission new services and access will be increased by extending hours and days of operation, integrating services and providing the online option using new technology. As the online service is phased in, clinic time will increasingly be freed up for more complex and vulnerable cases and the system streamlined, offering better value and improved information.

Achievements to date

- A complex procurement process for the on-line service element of the programme was negotiated and a contract with Preventx awarded to deliver the e-service from January 2018. Preventx leads a consortium including Chelsea and Westminster NHS Foundation Trust, whose sexual health services have been rated Outstanding by the Care Quality Commission, LloydsPharmacy and Zesty. The service launched in January 2018.
- The online service will deliver improved resident access. As the service is phased in over time, patients will no longer have to attend a clinic for STI testing if they do not need to, but will be able to have self-sampling kits sent to their homes or other preferred locations. Clinic access will still be open to all, but streamlined with those able to use the online service supported to do so.
- A Clinical Advisory Group (CAG) was established to ensure clinical leadership and advice on transformation proposals, and in particular the development and sign-off of clinical specifications and standards for integrated sexual health services and the online sexual health service. With most procurements concluded, the Clinical Advisory Group also welcomed clinical representatives from London's sub-regions and the London on-line service to join as new members of the advisory group in November.
- A new integrated sexual health tariff, which is an agreed set of currencies and tariffs to promote the delivery of integrated health services ensuring that providers are paid in line with the services provided.
- Robust governance structures are in place to support cooperation across participating London councils on open access services and the online sexual health service. The governance is overseen by a Strategic Board chaired by the Chief Executive of LB Camden, Mike Cooke. The governance structure includes: a Clinical Advisory Group; boards for management and oversight of the online service; and a commissioners' board.

Next steps

The introduction of new contracts for integrated sexual health services, procured on a sub-

region or individual authority basis, have been completed in most areas during 2017, or are due to be implemented in 2018.

The on-line e-service, offering patients the opportunity to order self-sampling kits to be delivered to their home address, is currently available via the Homerton Hospital in Hackney, at the new Sexual Health South West London service for Wandsworth, Richmond and Merton and London North West Healthcare serving the boroughs of Brent, Ealing and Harrow. The service will be available from the other clinics in the 27 participating boroughs over the next few months. As part of the planned roll out, from May 2018 the self-sampling kits will be physically available in clinics to be given out to eligible service users to use in the clinic or at home.

Commentary

The London Sexual Health London Programme (which is a development from the London Sexual Health Transformation Programme) is an excellent example of boroughs working together to find new solutions to complex issues, and in a way that reflects changes in Londoners' busy lives. The effectiveness and scale of the collaboration was recently acknowledged in the Municipal Journal Awards 2017 when the programme won in the "Reinventing Public Services" category.

The new online service represents a technically and logistically complex clinical procurement, carried out on behalf of 27 London councils. Once fully established, the service is likely to become the largest of its type in the world. However, as is sometimes the case with procurements of this size, the original implementation date for the e-service was rescheduled.

In London, we are seeing positive recent reductions in new HIV infections and new STIs as well as long term improvements in reducing late diagnosis of HIV. This is being achieved against the backdrop of a declining public health budget for boroughs. It is likely that in the coming years the demand for services will increase due to demographic and behavioural changes. Developments, such as the use of Pre-Exposure Prophylaxis (PrEP) to reduce the risk of HIV, may also increase the use of services. The excellent work already in place must continue if we are to ensure a sustainable system and to continue to improve the sexual health of Londoners.

Members who would like to receive regular updates from the London Sexual Health Programme can [sign-up here](#).

Members can also contact the programme team at sexualhealth@cityoflondon.gov.uk

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[Sexual Health London \(London Councils webpage\)](#)

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