

Health Partnerships Overview and Scrutiny Committee 11th June 2013

Report from the Director of Public Health

For Action Wards Affected: ALL

Sexual and Reproductive Health Services in Brent

1.0 Summary

- 1.1 This report summarises for the Health Partnerships Overview and Scrutiny Committee the Sexual Health and Reproductive Services which have transferred across to Brent Council as a result of the transfer of public health services from NHS Brent to Brent Council which formally took place on 1st April 2013.
- 1.2 This report briefing highlights the current provision of sexual health services in Brent, an outline of the council's role in relation to the commissioning and co-ordinating of services in the borough and the key challenges for the future commissioning landscape.

2.0 Recommendations

2.1 It is recommended that the Health Partnerships Overview and Scrutiny Committee considers this report and questions officers on the progress that has been made since the public health service transferred to the local authority.

3.0 Report

- 3.1 Brent Council as a local authority are responsible for addressing the sexual health needs of the local population and promoting a preventive agenda which focuses on good sexual health and in particular healthy lifestyles.
- 3.2 This involves ensuring appropriate access to sexually transmitted Infection (STI) testing, treatment, contraception, sexual health promotion and STI prevention. The current budget for Sexual Health services within the Public Health Budget is £6million.
- 3.3 Brent Council has a role in supporting or leading on the commissioning of sexual health services in the following areas;

- 3.4 HIV: Co-ordinating the commissioning of social care, non-clinical care and support services for people living with HIV. This is undertaken by commissioning specialist HIV services related to social care including packages on care and where appropriate residential placements.
- 3.5 Services commissioned by local authorities primarily focus on ensuring non-clinical care and support towards the self-management of HIV which in turn contributes to a reduction in onward transmission. Services also aim to reduce isolation, improve engagement and improve employability amongst Brent's HIV positive resident population.
- 3.6 Primary Care: Commission primary care by developing local service level agreements to meet the sexual health needs of the population such as. STI contact tracing, Intrauterine Device (IUD) fitting.
- 3.7 Open access sexual and reproductive health services: To commission services that that are fully accessible to all regardless of residency. The services commissioned should provide the following; STI testing, treatment and provision of contraception including the fitting of long acting reversible contraception.
- 3.8 Prevention and promotion: To commission relevant prevention services to reduce unplanned conceptions and reduce the spread of communicable disease.
- 3.9 Improving Public Health Outcomes: To commission services to improve public health outcomes in areas such as Chlamydia Screening, Teenage Pregnancy and late diagnosis targets for those living with HIV.

4.0 Detail

- 4.1 The following clinical services are commissioned via Public Health in Brent Council;
- 4.2 Genito-Urinary Medicine (GUM) Services: Services are commissioned to deliver specialise services in assessment, testing and treatment of a wide range of genital conditions particularly infections. This service also provides treatment, care and management for people living with HIV. The vast majority of Brent patients attend three GUM clinics based at Northwick Park hospital, Central Middlesex hospital and St Mary's hospital and are offered appointments within 48hrs.
- 4.3 The contract values for GUM services falls between £3.8m and £4.5m, the reason for this variation which represents a cost pressure to the Public Health Budget is that services are open access and funded a by a national Payment by results (PBR) tariff which in effects that residents can access services in any service across the capital and nationally and the council will be charged for any activity. This is an area of work that the Brent Council is looking to address through the West London Alliance in the future.
- 4.4 Chlamydial screening program: The service is commissioned through North West Hospitals to provide screening for asymptomatic people aged 16 25 in healthcare and non-healthcare settings across England. The primary goals are to control genital Chlamydia through early detection and treatment of asymptomatic infection and to reduce onward disease transmission. Brent has been one of the leading areas nationally for the effective screening for Chlamydia.
- 4.5 Central North West London NHS Foundation Trust (CNWL) Contraceptive Services: The service is commissioned through CNWL to provide contraceptive services for

Brent residents across 3 key locations; Hillside Medical Centre, Wembley Centre for Health and Care and the Willesden Centre for Health and Care. Services include the provision of long-acting reversible contraception (LARC) Cervical screening and Chlamydia screening.

5.0 Sexual Health Prevention:

- 5.1 HIV continues to be a major public health issue for London. In 2011 there were over 2,600 new HIV diagnoses made in London clinics. Despite a decline overall in new HIV diagnoses since 2004, which may reflect changing patterns in migration but it is clear that the number of new HIV diagnoses reported in 2011 was still 11% higher than in 2000.
- 5.2 Two key risk groups are men who have sex with men (MSM) and BaME communities from Africa where HIV prevalence is high. Sex between men was the most common route of infection for those diagnosed in 2011 in London (54%). The number of people newly diagnosed with HIV who have been infected through sex between men has risen by 20% over the last decade. Newly diagnosed MSM with HIV are much more concentrated in central London areas, while in contrast, newly diagnosed heterosexuals with HIV were more dispersed. Since 2003, there has been a fall in the number of new HIV diagnoses made among heterosexual men and women who may have acquired HIV in Africa.
- 5.3 A key concern is that many people are presenting late (44% in London) and this late diagnosis reduces the impact of early preventative treatments. Another key issue is that due to treatment we are seeing increases in the number of people living with HIV as a chronic illness.
- 5.4 Among the key challenges for Brent Council will be to reinforce prevention messages and promote regular HIV testing within high risk populations. Currently Brent commissions a number of local providers to promote prevention (see next section). In addition Brent is also part of a collaborative pan-London project on HIV prevention which is more focused on the MSM population and hard to reach communities.

6.0 The following sexual health and HIV prevention services commissioned by Brent Council:

- 6.1 Sexual Health on Call (SHOC): The service is commissioned (contract value; £127k) to support the delivery of preventative sexual health services in primary and community care settings by working with Health care professionals and young people. The service aims to increase the numbers of patients' tested in general practices, community pharmacy and primary care settings for testing for Blood Borne Viruses and Chlamydia. SHOC has also facilitated a number of pilot projects to increase the uptake of testing which includes working with new partners such as barbers and nail shops to increase uptakes on Chlamydia screening.
- 6.2 African Child: The service is commissioned (contract value; £88k) to reduce teenage pregnancy through targeted work with at risk teenagers and existing teenage parents including general sexual health and assisting those targeted to improve access to education and employment services.
- 6.3 Community Health Action Trust (CHAT) The service is commissioned (contract value; £100k) to target HIV prevention work amongst a range of clearly defined stakeholder groups in particular Black African communities by raising awareness of transmission,

the need to target those who need to be tested and signposting to clinical treatment interventions.

6.4 Pan London HIV Prevention Programme: Brent is one of a number of Boroughs who contribute to a range of pan London preventions services focusing on hard to reach groups and specific targeted groups such as men who have sex with men. The future of the programme is currently being discussed by London Councils. Brent is committed to remaining a part of the collaborative pan-London HIV prevention programme but at the present time it is not clear how this will proceed on a pan London basis.

7.0 Conclusions

7.1 Brent Council will be seeking to engage in the collaborative commissioning of GUM services through the existing partnership arrangements with the West London Alliance (WLA). The key challenge will be to manage and reduce spend on clinical treatment services and develop a more focused approach based on prevention and targeting more effectively those groups engaged in risky behaviour to promote healthy lifestyles in relation to sexual health.

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