Healthier Communities Select Committee				
Title	Consultation on Lambeth, Southwark and Lewisham three borough Sexual Health Strategy			
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1. Summary

This report summarises the contents of the Lambeth, Southwark and Lewisham Sexual Health Strategy, which was launched in April 2014 for a period of consultation, including presentation at boroughs' relevant scrutiny or health committees.

The strategy is based on a public health needs assessment, it covers analysis of investment and service delivery and makes recommendations regarding a direction of travel for shifting investment from clinic-based services to community provision and prevention and promotion.

The strategy has been developed with input from stakeholders, and consultation has included engagement with Clinical Commissioning Groups (CCGs) and specific focus groups with young people, MSM (men who have sex with men) and black and ethnic minorities.

2. Purpose

The Lewisham Healthier Communities Select Committee is invited to review and comment on the contents of the strategy.

3. Recommendations

The Committee is asked to 1) Endorse the main principle of the strategy, and 2) make any further comment on its content or the subject matter.

4. Policy context

- 4.1. From April 2013, as a result of the Health and Social Care Act 2012, the responsibility for population based health improvement through the provision of Public Health specialist advice, strategic responsibility and the commissioning of a range of health improvement services transferred to local authorities. The duties are covered by Part 2 of the Local Authorities (Public Health Functions and Entry into Premises by local Healthwatch representatives) Regulations 2013, which sets out specific duties regarding public health advice services, weighing and measuring of children, health checks, and sexual health services and protecting the health of the local population.
- 4.2 These duties were transferred from Primary Care Trusts (PCTs) and the interventions and services commissioned cover all the population for universal access as well as targeted services, and include specialist targeted areas such as sexual health and substance misuse services.

4.3 Lambeth Council is the host for a small sexual health commissioning team which operates across Lambeth, Southwark and Lewisham (as was the arrangement in the PCT). The commissioning service is governed by a three borough Board, chaired by Kerry Crichlow, strategic commissioning director for adults and children's' services in Southwark. Lewisham Council is represented by Ruth Hutt, public health consultant, and commissioners of children's services. The Council is responsible for commissioning open access GUM provision, sexual health prevention and promotion, community contraception, and sexual health in pharmacies and primary care. The 3-borough team also commissions termination of pregnancy services and HIV care and support on behalf of the Clinical Commissioning Groups.

5. Background

- 5.1 Lambeth, Southwark and Lewisham have some of the poorest sexual health in the country. Lewisham is ranked 17 out of 326 local authorities with 4066 acute STIs diagnosed in residents of Lewisham, a rate of 1468.2 per 100,000 residents (2012). In 2011, the diagnosed HIV prevalence in Lambeth was 13.9 per 1,000 population aged 15-59 years compared to 2 per 1,000 in England. For Southwark and Lewisham, diagnosed HIV prevalence was 11.7 and 7.8 per 1,000 population aged 15-59 years respectively. 35% of diagnoses of acute STIs were in young people aged 15-24years in Lambeth. For Southwark, 38% of diagnoses of acute STIs were in young people and 48% of diagnoses in Lewisham.
- 5.2 Under 18 conception numbers and rates have recently been published (February 2014). This data shows a continued reduction in teenage conceptions in both Lambeth and Southwark. However, in Lewisham the trend is increasing; the under 18 conception rate has reduced by 47.5% since the 1998 baseline to 42/1,000 15-17 year olds. This represents a slight increase on the 2011 rate which was 39.9/1000. Under 16 conception rates in Lewisham are lower than Lambeth and Southwark at 6.9 per 1,000. However, a smaller proportion of them end in abortion, 58.9% compared to over 70% in Lambeth and Southwark. Bellingham and Rushey Green wards in Lewisham have the highest abortion rates, and Rushey Ward has the highest rate of repeat abortion.
- 5.3 There are no accurate statistics available regarding the profile of the lesbian, gay, bisexual and transgender (LGBT) population either in Lewisham, London or Britain as a whole. Sexuality is not incorporated into the census or most other official statistics. The Greater London Authority based its Sexual Orientation Equality Scheme on an estimate that the lesbian and gay population comprise roughly 10% of the total population. This would make the lesbian and gay population of the borough roughly 20,000, although whether this includes bisexual or transgender individuals is unclear. About 0.4% of Lewisham households comprise same sex couples in civil partnerships (Census 2011). This is more than double the average for England.
- 5.4 Young people between 15 and 24 years old experience the highest rates of acute STIs. In Lewisham, 48% of diagnoses of acute STIs were in young people aged 15-24 years. The age profile is shown in figure 3. In 2011, 1507 adult residents received HIV-related care: 909 males and 598 females. Among these, 36% were white, 43% black African and 9.4% black Caribbean. With regards to exposure, 37% probably acquired their infection through sex between men and 59% through sex between men and women

6. Strategy

- 6.1 Against this background, the Commissioning Board had a priority to develop a three-borough sexual health strategy, to tackle high levels of need and set clear prevention and promotion programmes in place. The strategy builds on previous LSL strategies, achievements and work of Modernisation Initiative; there was an initial stakeholder engagement day in September 2013, which helped to build the local strategic priorities. Following extensive commissioning and public health engagement, a draft strategy was finalised and launched for consultation in April 2014.
- 6.2 The strategy sets out the local HIV and sexual health landscape, assessing previous strategies, financial resources and sexual health services in Lambeth, Southwark and Lewisham, as follows:
 - Promotion and prevention
 - Sexual health services/GUM/psychosexual
 - Primary Care
 - HIV Care and support
 - Termination of pregnancy (abortion)
 - Young peoples services & teenage pregnancy
- 6.3 The strategy sets out the following vision and strategic priorities:
 - Embedding good sexual health and wellness as part of a wider health agenda
 - Actively promoting good sexual health and healthy safe relationships, not just the absence of disease
 - Reducing the stigma attached to sexually transmitted infections (STIs)
 - Focusing on those statistically most at risk thereby reducing health inequalities
 - Reducing the rates of unplanned pregnancy and repeat terminations, especially for under 18 year olds
 - Reducing rates of undiagnosed STIs and HIV
 - Aligning strategic priorities with the intentions of our local CCGs
 - Developing the workforce to deliver integrated and improved services
 - Shifting the balance of care to community-based services that are accessible and responsive to the needs of service users
- 6.4 The strategy is in consultation until the end of July 2014: it is available on local websites, CCGs have been included in consultation, and specific focus groups have been held in each borough for MSM, black and ethnic minorities and young people, as these three groups were highlighted in the strategy as requiring particular focus. Scrutiny committees in each borough are also being consulted, prior to presenting findings at each Health and Well Being Board in October.
- 6.5 An action plan has been developed to deliver the strategy, which will be overseen by the three boroughs Commissioning Board.

7. Financial implications

7.1 Over the last few years NHS and local authority services budgets have consistently had to find cost-efficiencies whilst the demand for their services have grown. Although public health budgets transferred to local authorities have been ring fenced for at least

two years from April 2013, given the present economic climate it is imperative that all locally commissioned sexual health services are cost effective and deliver measurable outcomes. To achieve this LSL sexual health commissioning team will work with local partners to avoid duplication and to commission and deliver evidence based, needs led, responsive sexual health services.

7.2 In 2013/14, Lewisham Council invested a total of £6,402m in sexual health services; this represented £5,930m in clinical services, £212,000 in prevention, and £259,000 in primary care. A total of over £25m was invested across Lambeth, Southwark and Lewisham, mainly in clinical services. With the lifetime cost of HIV treatment estimated at £276,000 the health economics argument to invest in sexual health services to prevent such infections and, for example, unintended pregnancy are clear, and a direction of the strategy is to shift resources to prevention and promotion.

8. Legal implications

8.1. From April 2013, as a result of the Health and Social Care Act 2012, the responsibility for population based health improvement through the provision of Public Health specialist advice, strategic responsibility and the commissioning of a range of health improvement services transferred to local authorities. The duties are covered by Part 2 of the Local Authorities (Public Health Functions and Entry into Premises by local Healthwatch representatives) Regulations 2013, which sets out specific duties regarding public health advice services, weighing and measuring of children, health checks, and sexual health services and protecting the health of the local population. The sexual health strategy covers the duties relating to sexual health services.

9. Crime and disorder implications

There are no specific crime and disorder implications

10. Equalities implications

11.1 The strategy sets out areas where there is further work to undertake regarding assessing population needs, for instance, emerging populations. Improving access to sexual health services and advice for all communities is a theme of the strategy, and focus groups have been held with MSM and ethnic minority residents. The feedback from these residents will help to shape future models of care. A full impact assessment is being undertaken alongside the emerging consultation feedback.

11. Environmental implications

There are no specific environmental implications.

12. Conclusion

13.1 The Healthier Communities Committee is invited to consider the main elements of the report, provide feedback, and any further additional points regarding local sexual health needs and services.

Background documents and originator

Attached: Lambeth, Southwark and Lewisham Sexual Health Strategy

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