Birmingham City Council

Report to Cabinet

22nd March 2022



Subject:	APPROVAL TO CONSULT ON THE DRAFT STRATEGY FOR THE PROVISION OF SEXUAL HEALTH TREATMENT AND PREVENTION SERVICES
Report of:	Dr Justin Varney, Director of Public Health
Relevant Cabinet Member:	Cllr Paulette Hamilton, Health and Social Care Cllr Tristan Chatfield, Finance and Resources
Relevant O&S Chair(s):	Cllr Mick Brown - Health and Social Care Cllr Mohammed Aikhlaq - Resources
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Are specific wards affected? If yes, name(s) of ward(s):	□ Yes	⊠ No – All wards affected	
Is this a key decision?	⊠ Yes	🗆 No	
If relevant, add Forward Plan Reference: 009587/2022			
Is the decision eligible for call-in?	⊠ Yes	□ No	
Does the report contain confidential or exempt information?	□ Yes	⊠ No	
If relevant, provide exempt information paragraph number or reason if confidential: N/A			

1 Executive Summary

1.1 Birmingham City Council in partnership with Solihull Metropolitan Borough Council led by Public Health and Commissioners have been working closely with key strategic partners (NHS England, UK Health Security Agency, Birmingham and Solihull CCG and Black Country and West Birmingham CCG) to develop themes, priorities and our approach to meeting the sexual health needs of Birmingham and Solihull residents, which will in turn support sexual health treatment and prevention services for the period 2023 – 2030. The end-date of 2030 is to ensure alignment with other public health ambitions such as Fast Track Cities, which is a more joined up effort to eliminate and eradicate new transmissions of blood-borne viruses and

TB, encompassing a whole-city approach, Birmingham signed up to the Fast-Track Cities 2030 vision in 2020. Triple Zero is the City Strategy for tackling substance use for the period 2020 – 2030.

- 1.2 The draft Sexual and Reproductive Health Strategy 2023 2030 sets out our plans to respond to increasing rates of sexually transmitted infections (STIs) and HIV and improve the reproductive health of our citizens. Sexual Health can impact an individual's emotional, physical and mental health, their economic means and social relationships. The effects of poor sexual and reproductive health are far reaching and for those affected, the impacts are compounded by social stigma and fear.
- 1.3 A strong evidence-base has informed this Strategy to tailor its approach to address the sexual and reproductive health needs of Birmingham and Solihull's population through the following five themes:
 - 1. Theme One: Priority groups
 - 2. Theme Two: Reducing the rates of sexually transmitted infections
 - 3. Theme Three: Reducing the number of unplanned pregnancies
 - 4. Theme Four: Building resilience
 - 5. Theme Five: Children and young people
- 1.4 It is intended that the draft Sexual and Reproductive Health Strategy will open for public consultation via Be Heard on Monday 28th March 2022 for 30 days and end at midnight on Tuesday 26th April 2022.
- 1.5 Appended to this report are:
 - Draft Sexual and Reproductive Health Strategy 2023 2030 (Appendix 1),
 - Draft Sexual and Reproductive Health Strategy Consultation Questionnaire (**Appendix 2**),
 - Sexual and Reproductive Health Strategy Equalities Impact Assessment (**Appendix 3**).

2 Recommendations

2.1 It is recommended that Cabinet:

Give approval to consult on the draft Sexual and Reproductive Health Strategy 2023 – 2030 as set out in this cover report and **Appendices 1 and 2**.

3 Background

3.1 The provision of Sexual Health Treatment and Prevention services is defined as one of the "grant conditions" of the Public Health Grant and local authorities are mandated to commission open access sexual health services, including free STI testing and treatment, partner notification of infected persons, advice on and reasonable access to a broad range of contraceptives and services to prevent unplanned pregnancy.

- 3.2 The draft Sexual and Reproductive Health Strategy sets out Birmingham and Solihull's vision, ambitions and priorities for sexual and reproductive health services over the next seven years and provides a framework to guide the planning, commissioning and delivery of sexual and reproductive health services to improve sexual and reproductive health outcomes for Birmingham and Solihull citizens across the life course.
- 3.3 Investing in sexual health services has demonstrated value for money and a substantial return on investment. A national study has shown that every £1 spent on contraceptive services saves £9 across the public sector. Data also shows that 52% and 12% of unplanned pregnancies end in abortion and miscarriage respectively. Collectively, this can provide a cost saving per averted pregnancy of £23.91 over 10 years, which translates to £3.68 healthcare saving per £1 invested and £5.32 non-healthcare saving per £1 invested over a 10-year period.
- 3.4 The Sexual Health Needs Assessment (SHNA) undertaken in 2021 for Birmingham and Solihull, which underpins the draft Sexual and Reproductive Health Strategy, has identified key areas to continue and enhance investment, namely training of staff and the future workforce. Education and early intervention investment are also important, which will help further achieve the return on investment for Birmingham and Solihull on sexual and reproductive health services.
- 3.5 The draft strategy and associated action plan recognise that sexual health and wellbeing impact on and are affected by wider determinants of health such as social, economic and environmental issues, which shape daily life and affect people's health. Therefore, partnership working with all relevant organisations nationally, regionally and locally is essential. This will also ensure that the right actions are carried out for the right people, in the right place and at the right time.
- 3.6 The action plan detailed within the draft Sexual and Reproductive Health Strategy sets out a range of actions, which will facilitate our ambitions in relation to the five themes and will be based upon local and national evidence and best practice.
- 3.7 Led by the Public Health Division, Birmingham City Council in partnership with Solihull Metropolitan Borough Council and key stakeholders will ensure that through the implementation of the Sexual and Reproductive Health Strategy:
 - Every resident has access to sexual health services that meet their individual needs.
 - Services are local, relevant, approachable, confidential, non-judgemental, and provide services to anyone in need, while respecting all protected characteristics.
 - Citizens have control of their own sexual health with services providing support where needed.

4 Recommended Proposal

4.1 Approval of public consultation on the Draft Sexual and Reproductive Health Strategy 2023 – 2030 via Be Heard to commence on Monday 28th March 2022 for 30 days and end at midnight on Tuesday 26th April 2022. Public consultation will inform the further development of the Strategy and will ensure a breadth of views are considered in the development of the Strategy.

5 Consultation

- 5.1 It is intended that the draft Sexual and Reproductive Health Strategy will open for public consultation via Be Heard on Monday 28th March 2022 for 30 days and end at midnight on Tuesday 26th April 2022.
- 5.2 The decision to consult for 30 days is because this strategy is supported by and reflects our local Sexual Health Needs Assessment (SHNA) and whilst undertaking the SHNA in 2021, extensive engagement took place with GPs, Pharmacists, Communities and Speciality Practitioners who specialise in the following areas; U18s, Overs 65s, BAME, LGBTQ, Refugees and Migrants, Substance Use, Sexual Health, Homeless, Learning Disabilities, physical Disabilities, Sensory Disabilities and Sexual Violence. In addition, over 100 surveys within the community were completed.
- 5.3 Following public consultation, the results will be analysed and will be used to inform the final Sexual and Reproductive Health Strategy. It is intended that the Strategy will be presented to Cabinet for consideration in Summer 2022.
- 5.4 The consultation document (Draft Sexual and Reproductive Health Strategy) and consultation questionnaire are included as **Appendices 1 and 2** respectively.

6 Risk Management

- 6.1 The decision to publicly consult on the draft Sexual and Reproductive Health Strategy is essential in terms of procuring the Sexual Health service and the constituent tasks that are part of the Commissioning Cycle. The final strategy is key to the development of the service specification for sexual and reproductive sexual health services in the city and is an integral part of the Invitation to Tender (ITT) which in turn will ensure Birmingham City Council are able to commission open access sexual health services successfully.
- 6.2 A successful procurement process negates any potential organisational and operational risks associated with Birmingham not having a contracted Sexual Health Treatment and Prevention Service post March 2023.
- 6.3 Risks will be identified, evaluated and controlled in line with the Birmingham City Council Risk Management Methodology 2017.

7 Compliance Issues:

- 7.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?
 - 7.1.1 The provision of Sexual Health treatment and prevention services aligns to the following Council priorities:
 - An aspirational city to grow up in
 - A fulfilling city to age well in
 - Birmingham is a great, clean and green city to live in;
- 7.2 These priority areas are supported by the overarching commitment to reduce health inequalities (a duty of the Local Council under the Health and Social Care Act 2012).

8 Legal Implications

- 8.1 Section 12 of the Health and Social Care Act 2012 introduced a new duty at Section 2B of the NHS Act 2006 Act for all upper-tier and unitary local authorities in England to take appropriate steps to improve the health of the people who live in their areas. The draft Sexual and Reproductive Health Strategy outlines an approach to reduce health inequalities and improve health outcomes from a sexual health perspective.
- 8.2 Section 6C of the National Service Act 2006 as amended by the Health and Social Care Act 2012 and The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 provide for the discharge of public health functions by Local Authorities.

9 Financial Implications

9.1. Local authorities receive an annual ring fenced Public Health Grant from the Department of Health. The core condition of this grant is that it should be used only for the purposes of the Public Health functions of local authorities. Sexual Health Treatment and Prevention Services is one of the recommended functions that can be commissioned from the Public Health Grant.

10 Procurement Implications

- 10.1 None identified for the consultation process itself.
- 10.2 Existing contractual arrangements are in place until 31st March 2023, to support delivery of the strategy a procurement strategy will be developed once consultation is concluded and the final Sexual and Reproductive Health Strategy is approved.

11 Human Resources Implications

11.1 None.

12 Public Sector Equality Duty

- 12.1 The Equality Impact Assessment (EIA) is attached as **Appendix 3** and highlights the steps that are planned during the consultation to encourage participation from minority groups that may not be as likely to engage with the digital consultation platform.
- 12.2 A further EIA will be undertaken to review the strategy following consultation.

13 Appendices

- 13.1 Appendix 1 Draft Sexual and Reproductive Health Strategy 2023 2030
- 13.2 **Appendix 2** Draft Sexual and Reproductive Health Strategy Consultation Questionnaire
- 13.3 **Appendix 3** Sexual and Reproductive Health Strategy Equalities Impact Assessment (EIA)