

<b>HEALTH AND WELLBEING BOARD</b>		AGENDA ITEM No. 9
<b>25 SEPTEMBER 2014</b>		<b>PUBLIC REPORT</b>
Contact Officer(s):	Wendi Ogle-Welbourn, Director of Communities	Tel. 863749

## Performance Report on Sexual Health Services

RECOMENDATIONS	
<b>FROM :</b> <i>Jo Melvin, Commissioner – Public Health</i>	<b>Deadline date :</b>
For the Board to note:	
<ol style="list-style-type: none"> <li>1. For information - update on successful retender to provide a fully integrated community based contraceptive and sexual health service</li> <li>2. <i>For information – overview of performance against key sexual health indicators</i></li> <li>3. <i>For information - priorities for action.</i></li> </ol>	

### 1. ORIGIN OF REPORT

1.1 This report is submitted to Board following a request from the Health and Wellbeing Board.

### 2. PURPOSE AND REASON FOR REPORT

2.1 The purpose of this report is to provide an performance update to the Board on Sexual Health Services.

2.2 This report is for Board to consider under its Terms of Reference No. 3.3 'to keep under review the delivery of the designated public health functions and their contribution to improving health and wellbeing and tackling health inequalities'.

### 3. MAIN BODY OF REPORT

#### 3.1 Update on retender exercise

Following the retender exercise undertaken by Peterborough City Council during 2013/14, the local contraceptive and sexual health service based at Rivergate and the genitourinary medicine department based at Peterborough City Hospital were merged to create a fully integrated contraceptive and sexual health service in the community. The new 'ICASH' service which opened on 1<sup>st</sup> July 2014 offers local residents a one stop shop for all contraceptive and sexual health issues, including HIV treatment. By offering all services in one place we hope to normalise and encourage STI testing and treatment alongside contraceptive provision. The ICASH service also delivers outreach services to engage those most at risk of sexual ill health or unintended pregnancy and undertakes health promotion and prevention activities across the city.

The ICASH service will establish a sexual health network for the city to share good practice, improve links between agencies and contribute to setting strategic direction for sexual and reproductive health issues in the city.

#### 3.2 Overview of performance

The number of newly diagnosed STIs in the city is increasing and Peterborough's national ranking for STIs has deteriorated to 89<sup>th</sup> out of 326 local authorities (with 1 having the highest rate of STIs).

Rates of Gonorrhoea have been increasing year on year and are at their highest at present. We are working with Public Health England to ascertain if this is an outbreak or due to improved testing and partner notification.

Whilst teenage pregnancy rates have reduced in recent years they remain above the national average. Young people account for nearly 60% of new STI diagnoses and are a key target group for sexual health education and prevention. The most commonly diagnosed STI amongst under 25s is Chlamydia and Peterborough's high diagnosis rate indicates we are doing well at reaching the right young people. However, we need to increase the number of screens amongst the under 25s even further.

Rates of late diagnosed HIV are above the regional and national averages which suggests we need to improve our HIV prevention work and the uptake of HIV testing, particularly amongst men who have sex with men (MSM) and people of Black African origin.

Emotional wellbeing issues, drug and alcohol misuse and sexual risk taking behaviour are often linked. Health promotion and treatment needs to work holistically to identify and address these issues, particularly amongst young people and those MSM who engage in 'Chemsex' (sexual sessions under the influence of drugs).

Positively, GP prescribing of long acting reversible contraception (LARC) is above the regional and national averages.

### 3.3 **Priorities to improve current performance**

In order to improve performance the following priorities have been identified:-

1. Reduction in under 18 conceptions
2. Increase in Chlamydia screening amongst under 25s
3. Improve preventative health education and increase STI and HIV screening

### 3.4 **Proposed actions include:-**

- a.) Review and improve HIV prevention activity to ensure it is targeted to at risk groups and reflective of HIV diagnoses locally - *this has been set as an action for the ICASH service*
- b.) Increase the number of under 25s screened for Chlamydia - *this is an action for the ICASH service and has been raised as an action for the CCG/GPs via the Health and Wellbeing Programme Board*
- c.) Review and improve sex and relationship education - *action is underway to develop a PSHE programme linked to Healthy Schools Programme which includes sexual health, child sexual exploitation and domestic abuse*
- d.) Ensure young people have easy access to sexual health services (including school based provision) - *work is already underway to grow the number of secondary school based HYPAs which offer young people information and advice on a range of public health issues including sexual health, alcohol and drugs*

## 4. **CONSULTATION**

4.1 N/A

## 5. **ANTICIPATED OUTCOMES**

- To secure partner contribution to increasing the number of 15-24 year olds screened for Chlamydia
- To drive improvement in quality and scope of sex and relationship education in local schools

**6. REASONS FOR RECOMMENDATIONS**

Local authorities have responsibility for commissioning comprehensive sexual health services which includes contraception, STI testing and treatment and specialist sexual health services such as outreach, HIV prevention, sexual health promotion and school based services

**7. ALTERNATIVE OPTIONS CONSIDERED**

Do not implement actions as recommended. This rejected as the need for these actions has been clearly identified.

**8. IMPLICATIONS**

**9. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985)

Sexual and Reproductive Health Profiles, Public Health England  
<http://fingertips.phe.org.uk/profile/sexualhealth>

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