London Sexual Health Transformation Programme

Update June 2016

Welcome to the June briefing from the London Sexual Health Transformation Programme.

The focus of the programme can be summarised under three headings:

- Developing and procuring the new e services model to better signpost patients and provide home testing kits where clinically justified, and developing a strategy to encourage appropriate channel shift
- Agreeing a new pricing mechanism that supports flexibility and planning and ensures services are paid for fairly
- Supporting the sub regions as they commission face to face services.

The Case for Change

The programme’s aims, objectives and work priorities continue to be driven by a series of key factors. The overarching aim is to work collaboratively to design, agree and procure a system that will deliver measurably improved and cost effective public health outcomes, meet increasing demand and deliver better value.

The key drivers for this are:

- The need for sexual health services in London is significantly higher than the rest of the country, and continues to increase
- There are noticeable variations in access and activity across boroughs, with residents from across London accessing services in central London
- There are significant advantages in London boroughs working together to transform and commission services given the complex pattern of open access provision
- The importance of maintaining and improving strong clinical governance, safeguarding and quality assurance arrangements for commissioning open access services
- The need to respond to current and future financial challenges, and make the best use of resources available.

Survey Monkey

2231 people responded to the survey monkey survey. Thank you to everyone who helped run and promote this. The channel shift group are looking in details at the findings and ensuring that they inform and help shape our work.
The initial headline findings from the survey include:

- 54% of respondents said that the last service they used was a GUM Clinic. No other service was selected by more than 9%

- 52% of those responding attended a clinic for a check-up and reported no symptoms. 18% had started a new relationship and wanted an STI test. 18% reported symptoms of an STI

- 48% of people knew about the service they attended as they had used it before. 16% did online research and 12% said the service was recommended to them

- When asked what was important when choosing a sexual health service the top four answers given were: confidential, low waiting times, convenient opening hours and walk-in service.

It is very encouraging that the headline findings of this survey broadly match the results of the waiting room survey we carried out last year and reinforce that the model we are proposing will be acceptable and appropriate for patients. Crucially, the survey has also focused our thoughts on the issues that are most important to patients such as ease of access and confidentiality. We will use this feedback as we finalise service specifications over the next few weeks.

A slide deck giving some more detail on the findings of the survey is available on the LSHTP website HERE.

**Frequently Asked Questions**

Throughout the engagement activities of the programme we have encouraged patients, clinicians, provider organisations, commissioners and other stakeholders to let us have their questions. These have helped us challenge assumptions and review and revise the plans we have to check that we are progressing towards the aims set.

The latest version of the FAQ is now available on the website HERE. It sets out some of the main questions we have received and offers some initial answers.

If you have a question to ask, or have heard something about the programme that you think needs to be clarified, please contact one of those named at the end of this briefing. The FAQ document will be updated regularly.

**Integrated Sexual Health Tariff and Pricing Strategy**

After considerable review and due diligence work the majority of London councils are now intending to implement the Integrated Sexual Health Tariff as the preferred payment mechanism for services. We hope to complete the work to refresh the pathways with clinical colleagues this month and we will feedback to all of the providers on the results of
the audit work. Boroughs are working sub-regionally to develop implementation plans for the introduction of tariff as part of the procurement process and further information on this will be provided over the coming months.

E-services procurement

The e services group continues to work on finalising the tender documents with the plan being to go out to tender during July.

We held a very successful bidder day on Monday 13th this week where 60 potential bidders and others heard presentations about the specification and the process we are following. There was a very helpful and positive Q&A and more information will be placed on the procurement portal.

Channel Shift Group

The channel shift group has met twice now and is developing greater insight on the different populations we are seeking to communicate with. If you have any worked up research or survey findings that would help us in this please contact anna.bryden@richmond.gov.uk

Sub Regional Updates

The sub regional groups evolved through the programme as it was recognised that trying to commission everything at a pan London level is impractical. The sub regional structure emphasises the geographical links that exist and allows boroughs with common patient flows and patient profiles to deliver the vision of the LSHTP in a way that reflects and recognises local issues. It was agreed that a sub regional structure was the most practical and sensible way to implement the transformation vision.

There are 6 sub regions:

<table>
<thead>
<tr>
<th>Sub Region</th>
<th>Boroughs</th>
<th>Main contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outer North West London</td>
<td>Ealing, Harrow, Brent</td>
<td>Audrey Salmon</td>
</tr>
<tr>
<td>Inner North West London</td>
<td>Westminster, Kensington and Chelsea, Hammersmith and Fulham</td>
<td>Gaynor Driscoll</td>
</tr>
<tr>
<td>North East London</td>
<td>Havering, Newham, Redbridge, Tower Hamlets, Waltham Forest</td>
<td>Simon Reid</td>
</tr>
</tbody>
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This month’s updates from the sub regions:

**Inner North West London**

The ITT for GUM/SRH will be published on 17th of June. All documents have been agreed including the integrated tariff pricing strategy. The service specification has been updated to accommodate comments from FSRH and reps from the LSHTP clinical group.

**Outer North West London**

The ONWL sub region will be holding a market engagement event on 16 June and is developing plans to publish an OJEU notice at the end of June.

Boroughs have agreed to align the scope of services available in the sub-region. Currently we are developing our pricing strategy in preparation for the procurement exercise.

**North Central**

Councils in North Central London have been working together to finalise their procurement plans. A ‘Meet the Buyers’ event was held on 9 June, attended by over 50 participants, where an overview of the sub-region’s plan and approach to procurement was shared, followed by a Q&A session.

**North East London**

Councils in north east London have been working together to engage with residents. A waiting room survey has taken place in the GUM and SRH services in Newham, Tower Hamlets and Waltham Forest reaching approximately 1500 service users. In addition a further dozen focus groups have been completed. The results are now being analysed.

**South West London**

Several boroughs are now proceeding with the eservices procurement. Wandsworth is procuring an integrated service model this year to complement system redesign and may be joined in this by Merton and Richmond.
South East London

The consultation exercise referred to last month has now concluded and the results are being analysed. Initial findings show that over 60% of those who responded would be happy to see an extension of online services, with 19% opposed.

The pilot for integrated online and clinic based services has now commenced.

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Please do pass this briefing on to anyone who might be interested, and have a look at our website at www.wla.london/wla/wlanew.nsf/pages/WLA-385 or contact those named below if you have any specific questions.

The next briefing will be issued week beginning 11th July. If there are subjects you would like to see covered, or have any comments about the briefing, please let us know.

For further details on the Programme please contact

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