

**Minutes of Sexual Health Forum held on 20 June 2012:
Richmond House, London**

Present:

Forum Members

Joyce Gould (Co-Chair)
Gabriel Scally (Co-Chair)
Jules Hillier - Brook
Nick Partridge - THT
Stuart Cowie - LIFE
Tracey McNeill - MSI
Chris Wilkinson - FSRH
Andrew Pearmain - ADSS
Janet Wilson - BASHH
Jane Anderson - BHIVA
Anna Martinez - NCB/SEF
Julie Bentley - fpa

Apologies:

Mark Bale, DH
Simon Blake – Brook
Simon Bowen - ADPH

Others Present

[REDACTED], DH
[REDACTED], DH
[REDACTED], DH
[REDACTED], DFE
Noel Gill, HPA
[REDACTED], DH

1. Welcome and apologies

- 1.1 The chairs welcomed Jules Hillier (Brook) and Anna Martinez (NCB/SEF) to their first meeting of the Forum.
- 1.2 Apologies had been received from Simon Blake (Brook), Simon Bowen (ADPH) and Mark Bale (DH).

2. Minutes of the meeting held 21 March 2012 and matters arising.

- 2.1 The meeting **agreed** the minutes as a correct record. There were no matters arising not covered elsewhere in the agenda.

3. Discussion in advance of Anne Milton's attendance

- 3.1 Joyce Gould thanked members for the questions they had submitted and explained these had been developed into themes to enable the time with Anne Milton to be spent most productively. Members were asked to take the lead on introducing each of the themes. The themes agreed in advance were:
- Transition to new commissioning arrangements;
 - Improving and maintaining sexual health and HIV outcomes;
 - Improving HIV prevention and increasing access to testing.
- 3.2 Nick Partridge expressed concerns around Monitor's role in relation to local authority commissioned services and asked for clarification on its role in protecting and promoting patient's rights. Joyce Gould said it was her understanding that Monitor is NHS facing only and therefore has no relationship with Local Government. [REDACTED] agreed to seek further clarification from colleagues in DH and report back to the Forum.
- 3.3 It was agreed that members would give key messages to the Minister and make positive suggestions about the actions they would like to see happen.
- 3.4 The meeting moved onto the DH update. Julie Bentley expressed concerns about the role of the forum in relation to the sexual health document and asked would the Forum be given further opportunities to comment on the policy document. [REDACTED] responded that Ministers had seen and commented on the draft document and asked for some further work after which the document would be shared with the Forum. [REDACTED] also clarified that a final decision on whether this would be published as a strategy had yet to be taken therefore the terms 'strategy' and 'document' were at the present time interchangeable. The challenge was to get the document out before Parliamentary recess at the end of July, if possible. The policy document would be a 'statement of policy' looking at how systems may work in the future and reflect issues raised. PHE is likely to have a role in preparing more detailed briefings on specific topics. Concerns were also expressed about the role of Healthwatch, as there is no guidance.
- 3.5 Members welcomed the latest teenage conception and abortion data. [REDACTED] said this was the result of concerted efforts and joined up working across a range of partners but that it was essential that this focus be maintained. Tracey McNeill informed the Forum that MSI were conducting a piece of research on repeat teenage pregnancies, what the triggers were and that preliminary results were due in 2013.

4. 10: 45am Anne Milton, Parliamentary Under Secretary of State for Public Health and Dr Felicity Harvey, Director General of PH, in DH arrived.

- 4.1 The Chairs welcomed the Minister to the meeting. Anne Milton highlighted her priorities for sexual health are to improve and maintain sexual health services, to ensure people have sufficient knowledge and information to make informed choices and to ensure appropriate services were in place to meet people's needs. She acknowledged that services were patchy in places and that a lot needed to improve. She also saw herself having an important role in addressing inequalities, especially in hard to reach groups.

There followed a detailed discussion a summary of which is captured below.

4.2 Maintaining and improving SH outcomes

- **How can the Forum help support the development of the sexual health document? how will we measure meaningful outcomes? In addition, how will underperformance be managed and how can we can identify and improve abortion rates for all women?**

Anne Milton stressed the importance of a smooth transfer to PHE and the work that was still ongoing to get the right structures in place. PHE will work with local authorities to share good practice and help identify and remove barriers. She was also clear that improving sexual health needed to be addressed across all age groups, more focus on developing emotional resilience and inequalities identified. Her ambition was to see sexual health mainstreamed and less isolated. The sexual health strategy has to be written in such a way as to have the right impact to inform and improve practice and to translate the ambitions into actions. Directors of Public Health local authorities and lead counsellors in particular will be key in determining how they utilise the document and work to improve sexual health in their areas.

4.3 Transition – Key Points

- **There is general awareness of the work underway locally around transition including contracts but would there be a requirement for novation of contracts in the first year at least and what support will there be for local government to improve their understanding of what open access services are?**

Anne Milton responded that details around what was happening with contracts would be circulated to the Group. [REDACTED]

commented that DH was of the view that councils have been given what they need to plan for the smooth transfer of public health functions and contracts. Whilst local areas commissioners may wish to review contracts in the normal course of business it is expected that most Local Authorities will be confident in accepting existing contracts as the basis of the first year's service portfolio.

Anne Milton asked the Forum how much involvement they had had with upper tier/lower tier authorities. She considered there were lots of opportunities to engage. Members were concerned that LAs would be commissioning clinical services for the first time and would need support in taking on this function. It was noted that LAs already commission a complex range of services and that guidance was being developed on clinical governance. The Sexual health Team was pulling together some Q&A to share with the Forum.

- **Although Local Authorities are very positive about their new public health responsibilities, there is a lot of confusion around language being used and there are cultural barriers to navigate**

Anne Milton replied that it was very important to find a common language and that this must be viewed as a massive opportunity to mainstream sexual health.

4.4 Improving HIV prevention and increasing access to testing. Key Points Made:

- **The HIV epidemic is at a critical phase; excellent clinical outcomes are being achieved but there are continuing high rates of new infections, more needs to be done to reduce late diagnosis;**
- **Important for people to know their HIV status and those living with HIV to access high quality services. High quality data on testing inside and outside of traditional settings was needed to support monitoring.**
- **Members were keen to find out if the Government supported a separate HIV prevention strategy;**
- **How do we spread good stories, use new media in different ways; work with young people in different ways.**

Anne Milton agreed with many of the points made and emphasised again that this was why the sexual health strategy was so important in recognising the needs of all age groups and that the document must reflect all of these elements. She was clear that the sexual health strategy needed to be cutting edge and not business as usual.

Through speaking to LGAs and councillors, she did appreciate that there was a big learning curve.

- **What mechanisms are there for picking up different groups to avoid fragmentation of services? Anecdotal evidence that some Local Authorities are not accepting current contracts on the grounds of affordability.**

Felicity Harvey stressed that PHE will have a key role in supporting Local Authorities in their role in commissioning. She had picked up through meetings lots of enthusiasm from Local Authorities. Work was already underway with individual authorities to identify what support they might need at a local level and the work of the DPH would be critical here. Gabriel Scally expressed concern about the number of DPH vacancies and the fact that a significant number had indicated that they would not transfer to LAs.

11:30 – Anne Milton departs

5. Sexual Health Policy update and transition issues

- 5.1 Tracey McNeill asked for an update on the CQC abortion investigation and what the process was from hereon in. [REDACTED] responded that once all reports had been agreed with providers, they would be published on the CQC website. The expectation is that there will be another Written Ministerial Statement (WMS) to Parliament to highlight the publication and next steps. In the light of the reports, the GMC and the NMC may start investigations of individual health professionals. Once the date for publication is agreed, members will be notified if possible.
- 5.2 Members expressed concerns over the latest chlamydia data which saw a 10% decrease in community settings. [REDACTED] commented that the sexual health policy document will give a firmer direction of travel for the NCSP and that young people were being consulted on a change of name. She stressed that there were efforts being made to strengthen clinical aspects of the programme including partner notification and follow up. Jane Anderson expressed concerns about contracting out of GUM services, which excluded HIV. In one Trust the HIV service had closed and patients moved to another area. There were implications for pathways of care if HIV and GU services are not integrated. She undertook to provide specific examples of where this was happening.

6. Young People and Sexual Health in the New World – Presentation (Jules Hillier)

6.1 Jules Hillier gave a presentation on Young People and Sexual Health in the New World (slides circulated) and asked members for comments on:

- How we ensure that commissioners maintain a focus on young people's sexual health?
- How will we advise Health & Wellbeing Boards?
- How do we make sure contracts do not get lost in transition?

The following points were made:

- Care pathways is not a Local Authority term. What is more important is the patient journey (between pathways). If there are too many stops, the patients will not continue the journey
- BHIVA lexicon. A Service User Group are coming up with a dictionary of user-friendly terms. Can the Forum develop something similar for wider sexual health?
- The Kings Fund have undertaken a survey of Health and Wellbeing Boards and found a variation in the size and membership locally
- Learning sets being developed for Health and Wellbeing Boards included one for Children and Young People
- Who will be providing clinical governance? will CCGs have a role? The Department of Health is examining the issue of clinical governance for Local Authorities and should be issuing guidance on this later in the year.
- The Children and Young People's Strategy being developed includes a Young People's indicator set drawn from the PHOF and NHSOF.
- Feedback from young people from Positive for Youth found that they want to see sexual health de-stigmatised and mainstreamed.

7. Close and networking lunch

7.1 Members were asked to hold 13th September in their diaries for the next meeting. Venue to be confirmed.