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ROCR approval applied for

Department of Health
133-155 Wellington House
Waterloo Road
London SE1 8UG

6 September 2012

To: NHS SHA Cluster Chief Executives
NHS PCT Cluster Chief Executives
Specialist Commissioning Groups

Dear Colleague

TENDERING OF SEXUAL HEALTH GUM SERVICES

As part of the process of transition to new systems and ways of working it is important that we work together to minimise the risk of action being taken that may have unintended consequences. With this in mind, we are asking you to take action on a particular issue relating to the commissioning of genito-urinary medicine (GUM) and sexual and reproductive health (SRH) services. Initially this will involve the completion of a short questionnaire (attached).

Since the 1980s, many HIV services have been co-located within GUM alongside services for STI diagnosis, testing, management and treatment. This has included joint staff, premises and facilities. In many areas HIV treatment and care is dependent on the wider infrastructure provided by GUM being in place. Thanks to effective treatment, for many people with HIV it can be a treatable long term condition and the clinical outcomes in the UK are consistently high.

From April 2013, the NHS CB will commission HIV treatment and care services and local authorities will commission GUM, HIV prevention and testing, and SRH services. We are aware that some local commissioners have tendered or plan to tender local GUM services as part of a move to integrate and modernise GUM and SRH provision. Because of the forthcoming changes in commissioning responsibility it appears that some of the specifications exclude the provision of HIV treatment services. Where the tender exercise results in a new provider for GUM and SRH services, an unintended outcome may be that the NHS Trusts that previously provided joint GUM and HIV treatment services, may no longer find it viable to continue to provide HIV treatment services independently from GUM. This could have implications for HIV patients with their services transferred to a new provider.

Our priority is to ensure a smooth transition to the new commissioning arrangements for sexual health and HIV services from 2013, avoiding fragmentation and continuing to provide high quality services for all patients. While changes to current service configurations are for local decision and may

be necessary and needed, it is important that any risks are identified and managed to promote integrated, innovative and cost effective care pathways for patients. It is also important that people with HIV using such services are consulted and engaged in any proposed changes.

We are, therefore, seeking information about your current or future plans to tender for sexual health services provided in GUM clinics. We are particularly interested in the impact any tender will have on HIV treatment services currently provided alongside GUM.

Please return the attached short questionnaire to Kay Orton [kay.orton@dh.gsi.gov.uk] by 12 October 2012. Responses should be submitted in partnership with local Specialised Commissioning Group colleagues. This letter has been copied to colleagues in the NHS Commissioning Board Authority.

Yours faithfully



David Flory CBE
Deputy NHS Chief Executive
Department of Health



Felicity Harvey CBE
Director General for Public Health
Department of Health

SEXUAL HEALTH AND HIV TREATMENT SERVICES

1. Please tell us how many patients are receiving HIV treatment and care services through GUM services in your PCT area.
2. Are you planning to re-tender GUM and SRH services?

If the answer is no, no further response is required. If the answer is yes:

3. Will the contract specification include HIV treatment services currently provided in GUM?
4. If the specification excludes HIV treatment, what arrangements are in place to continue to provide services to patients with HIV?
5. Have you or do you plan to consult HIV patients about proposed changes?
6. When do you propose to go to tender?

Please provide responses to kay.orton@dh.gsi.gov.uk by 12th October 2012.