

London Sexual Health Transformation Programme

Update January 2016

Welcome to the first monthly briefing of what will be a very exciting and busy year for the programme. We will do all we can to keep you informed about progress and include you in discussions and decisions wherever possible. Keep an eye on our website at www.wla.london and contact those named at the end of this briefing if you have any specific questions. Please feel free to send this briefing note onto colleagues who might be interested.

Background

As most of you will know the Programme was set up to work in partnership with local authorities across London to deliver a new commissioning model for open access sexual health services. This includes Genito-Urinary Medicine (GUM), services for the screening and treatment of Sexually Transmitted infections (STIs) and Sexual and Reproductive Health Services (SRH) (community contraceptive services).

It was agreed that with the continued pressure on public sector finances, and the reduction of public health budgets, there was a compelling case to review how we best provide these vital services. The aim of the Transformation Programme is 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.

So we remain committed to finding solutions that help meet the needs we see in London, with five main drivers behind the change programme:

1. The need for sexual health services in London is significantly higher than the England average, and has risen significantly in recent years.
2. There are noticeable variations in access and activity across London boroughs, with high numbers of residents from across London accessing services in central London.
3. Given London's complex pattern of open access services, there are important advantages for London boroughs to transform and commission services together
4. We must continue to ensure strong clinical governance, safeguarding and quality assurance arrangements are in place for commissioning open access services
5. We want to respond to current and future financial challenges, and ensure we are making the best use of resources available

Council Cabinet Updates

There are 28 boroughs in the collaboration. 19 councils are looking to procure the pan-London online e-service and re-procure sexual health services; the other 9 are taking part in the programme for the pan London online e-service procurement only.

So far, 11 council cabinets have agreed the business case and delegated authority to continue progressing the programme, with more booked for January decisions. Councils that are participating in the programme for eServices only are not necessarily required to go through governance clearance process.

The full list of boroughs involved in the collaborative to some level is as follows:

Barnet, Bexley, Brent, Bromley, Camden, City of London, Croydon, Ealing, Enfield, Hackney, Hammersmith and Fulham, Haringey, Harrow, Havering, Islington, Kensington and Chelsea, Kingston, Lambeth, Lewisham, Merton, Newham, Redbridge, Richmond, Southwark, Tower Hamlets, Waltham Forest, Wandsworth, Westminster.

Timelines

A number of procurements will be required to put the new system in place.

The first stage will involve a pan London procurement for e-services. We plan to issue a Prior Information Notice to the market in the next few days. Responses to the PIN will enable us to develop accurate and effective tender documents. It is important to note that specifications are not yet fixed and the information collected from the questionnaires that will go out with the PIN will significantly shape the final specification and service description. It is important that providers use this opportunity to work with us pre-procurement so that we are clear about what is deliverable.

Using the insight gathered from the PIN questionnaire responses we will then finalise the Invitation to Tender (ITT) documents and refine the clinical specification. The plan is to issue the ITT by the mid to end of April with an initial deadline for responses of mid to late May.

The first evaluation of submissions will take place through late May/early June; with a period of negotiation with bidders being held through late June and early July. This will allow the final tenders to be submitted in August, final assessment to be conducted through September and a recommendation to be sent to local authority officers and members in October with the contract(s) being awarded by the end of November. This creates time for detailed operational discussions to take place with the preferred provider(s) before we go live with the new system in April 2017.

All of these dates rely on a number of actions being completed and decisions being made on some key issues. We will keep the timeline under review and inform you of any changes or expected delays.

The procurement of networked clinical services will follow a similar process. The dates and timescales for each area planning to procure their services will be finalised after council approvals are obtained. Further details on the processes for procurement of local services will be provided in the February update.

Procurement Process

As mentioned a few months back, we are using the Competitive Procedure with Negotiation (CPN) process to procure the pan London e-services. A number of local authorities have indicated that they will use this process for reconfigured local services also. This is a relatively new process for public procurement and people have requested further information about it.

The CPN procedure is particularly useful for complex procurement programmes where the more usual 'Open' or 'Restricted' procedures would not allow for the necessary dialogue with bidders to take place.

CPN provides for a structured process to enable discussions as part of a competitive process. We will follow the same procedure as more standard methods of procurement in terms of asking for expressions of interest, shortlisting etc. However, the process then allows us to reserve the right to engage with a number of potential bidders through a dialogue process to test out ideas. This means should initial tenders not suffice then we will have a final shortlist and following a dialogue stage we will ask for full and final tenders.

E Services

A number of people have asked for some more detail on what the new e portal might look like, and what it might provide. The specification is under development and further engagement with all stakeholders is required to finalise this. At present the following elements are being considered:

- A sexual health brand for London to support self-care and health promotion
- Online access to STI and contraception information in a format designed to support decision making
- Assessment of service user need and direction of patients to most appropriate service to meet those needs, including booking appointments online if appropriate.

- Access to remote/home self-sampling for Chlamydia, Gonorrhoea, HIV, and Syphilis in appropriately identified patients, supported by rapid pathology services. We are considering if Hepatitis B and C should be included in this list.
- Index and service-led partner notification system for some STI's
- Access to a secure system where a user can log on to their account to maintain and view their personal sexual health record.

Clinical Engagement

We are sorry that we had to cancel the event planned for clinicians on 19th January. We will be in touch soon with details of the next event.

Public Engagement

To follow up the focus groups held before Christmas we have now sent a simple survey monkey survey to boroughs to place on their websites if they feel it appropriate to do so. The survey is available [HERE](#) and at <https://www.surveymonkey.co.uk/r/T3QSC9N> . Please publicise this in any way that you can as the more responses we receive the more useful the feedback in helping us design the new service and ensure we have not missed anything crucial from our planning

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