Implementing recommendations of the review of sexual health services – action to date and next steps

Date of Expiry / Review: N/A

For Action by:
Executive Directors of Public Health
Medical Directors
Clinical Leads NHS Sexual Health Services
Community Pharmacies
Primary Care

For information by:
Board Secretaries
Secretary to Board Secretary Group
Local Health Board Chief Executives
Local Health Board Chairs
Welsh Government, Director General
HSS/Chief Executive NHS Wales
Deputy Chief Executive NHS Wales
HSS Operations Team
HSS Comms Team

Sender: Dr Frank Atherton, Chief Medical Officer for Wales

DHSS Welsh Government Contact(s):
Health Protection, Health and Social Services Group, Welsh Government, Cathays Park, Cardiff, CF10 3NQ

Enclosure(s): Letter from the Chief Medical Officer for Wales
Dear Colleague,

**Implementing recommendations of the review of sexual health services – action to date and next steps**

It is almost one year since Public Health Wales published *A Review of Sexual Health Services in Wales* which included a number of recommendations that if implemented would improve both patient and professional experience.

I am writing to you to request your contribution to the implementation of the recommendations and to update you on progress to date on those areas for which you do not necessarily have direct ownership/leadership.

**Needs Assessment, Sexual Health Service Specification and Self Assessment Audit tool**

One recurrent theme throughout the review was the pressure on current services - attendances have doubled in the last five years - and the inequity of service provision across Wales. Some populations were found to be disadvantaged through lack of service provision e.g. those in prisons and rural communities, whilst others experience inequity in service provision e.g. services provided by primary care and accessibility to, and availability of, abortion services.

You may, by now, have undertaken a local needs assessment and have a thorough understanding of your population’s sexual health services needs. To ensure the needs assessment is robust, the Sexual Health Programme Board has endorsed the *Sexual Health Service Specification 2018* developed by Public Health Wales in partnership with key stakeholder groups. The specification has been developed to encompass a model of integrated service delivery based on national policy, best practice, local health needs, and evidence based practice. It recognises that the primary contribution this service makes to overall sexual health is one of diagnosis, treatment of infection, and delivery of interventions to prevent unplanned pregnancy. This model aims to ensure the delivery of prudent, effective, high quality integrated sexual health care.

You will wish to consider whether or not your sexual health services meet the minimum standards in the specification and I would strongly advocate that you audit your services using the *Sexual Health Services Audit Tool 2018*. Undertaking this audit will enable you to understand what service improvements are required locally, and will support you in the development of a meaningful sexual health service improvement plan. The audit tool will assist Welsh Government in gaining a better understanding of improvements needed in sexual health services both at a local and an all Wales level. I ask that you return your completed audits and local improvement plan to the Health Protection Mailbox by end of June 2019.
There are a number of actions from the review which are currently being taken forward by Public Health Wales and other key stakeholders, which you will wish to be aware of whilst undertaking your audit. These are attached at Annex B.

Yours sincerely,

Dr Frank Atherton
Chief Medical Officer for Wales

References


Annex A

Recommendations

1. To address the inequities in service provision health boards should understand the needs of their population and have a system in place to deliver services to vulnerable groups and to improve services more widely. In particular:
   - Health boards should ensure that staff are appropriately trained to meet the needs of the population;
   - Services should: increase capacity through the provision of more drop-in clinics.

2. Oral regular contraception should be available over the counter within community pharmacies.

3. Health boards should look at other opportunities to extend provision of Long Acting Reversible Contraception (LARC) in healthcare settings.

4. Health Boards should consider whether an enhanced contract with primary care would improve service provision for their population.

5. For the purposes of individual patient care, relevant information should be shared among the registered and regulated health care professionals who have a healthcare relationship with the individual. Consideration should be given to a revision or replacement of current regulations (National Health Service (Venereal Diseases) Regulations 1974).

6. Opportunities for using the latest diagnostic e.g. molecular/point-of-care testing (POCT)/genomic should be considered in future delivery models. Health boards should assess the need and plan and provide appropriate POCT testing for the population they serve.

   Patients would welcome the introduction of self-testing, accessed through community settings and online, as an additional method for accessing sexual health services.

7. Consideration should be given to amending the legal framework to allow for a patient’s place of ordinary residence to be classed as a place where treatment for termination of pregnancy may be carried out.

8. Wales should have a case management and surveillance system that provides a national networked solution across the NHS in Wales. Consideration should also be given to including non-NHS (e.g. C-Card Schemes) sexual health services into this software programme.
9. Sex and Relationship Education is not addressed in this review as it is part of the Curriculum Review. However, consideration should be given to developing national information set on sexual risks which should be presented in a format accessible to a wider audience.
### Sexual Health Service Improvement plan 2018 -2020

#### Actions for 2018/19

<table>
<thead>
<tr>
<th>No</th>
<th>Commitment</th>
<th>Action to date</th>
</tr>
</thead>
</table>
| 1  | To address the inequities in service provision health boards should understand the needs of their population and have a system in place to deliver services to vulnerable groups and to improve services more widely. In particular:  
  - Health boards should ensure that staff are appropriately trained to meet the needs of the population;  
  - Services should: increase capacity through the provision of more drop-in clinics.  
  - Health boards should consider whether an enhanced contract with primary care would improve service provision for their population (Recommendation 4 from review). | A service specification and audit tool have been developed. Health Boards have been tasked with reviewing their services against the specification standards and developing a local sexual health services improvement plan.  
Lead nurses from sexual health have met and are working on the development of a professional competency framework for all staff  
Public Health Wales are undertaking a review of STI screening in prisons to better understand how the sexual health needs of the offender population are met. This review includes an assessment of current screening offered and the development of pathways for future delivery of STI screening in prison setting. |
<p>| 2  | Oral regular contraception should be available over the counter within community pharmacies.                                                                                                                        | Pharmacists across Cardiff and Vale UHB are currently being trained to provide regular contraception. This will be piloted from April 2019 with the intention of extending the service to all health boards.                                                                                                                                                                      |
| 3  | Health boards should look at other opportunities to extend provision of Long Acting Reversible Contraception (LARC) in healthcare settings.                                                                                     | FSRH training is available and post-partum contraceptive provision is being considered as part of the new Maternity Strategy.                                                                                                                                                                                                                                     |
| 4  | For the purposes of individual patient care, relevant information should be shared among the registered and regulated health care professionals who have a healthcare relationship with the individual. Consideration should | Public Health Wales are working with all engaged in sexual health service provision to review existing guidance and agree a common understanding of its interpretation.                                                                                                                                                                                                                     |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>5</strong></td>
<td>Opportunities for using the latest diagnostic e.g., molecular/point-of-care testing (POCT)/genomic should be considered in future delivery models. Health boards should assess the need and plan and provide appropriate POCT testing for the population they serve. Patients would welcome the introduction of self-testing, accessed through community settings and online, as an additional method for accessing sexual health services.</td>
</tr>
<tr>
<td></td>
<td>Public Health Wales are developing a National Sexual Diagnostic Laboratory offering PCR testing for all common sexually transmitted infections. This all-Wales facility will be operational no later than November 2019. A self-testing service provision including online access is currently being piloted in Hywel Dda UHB area. Public Health Wales is working with service users from different groups to develop accessible instructions for all using animation.</td>
</tr>
<tr>
<td><strong>6</strong></td>
<td>Consideration should be given to amending the legal framework to allow for a patient’s place of ordinary residence to be classed as a place where treatment for termination of pregnancy may be carried out.</td>
</tr>
<tr>
<td></td>
<td>The Cabinet Secretary for Health and Social Services announced revised termination of pregnancy arrangements allowing the 2nd abortion pill to be administered for use in the woman’s own home on 29 June 2018. These revised arrangements have enabled patients up to 9 weeks + 6 days gestation to go home to self-administer misoprostol and pass the pregnancy. Health boards have implemented these revised arrangements from the date the notification was issued.</td>
</tr>
<tr>
<td><strong>7</strong></td>
<td>Wales should have a case management and surveillance system that provides a national networked solution across the NHS in Wales. Consideration should also be given to including non-NHS (e.g., C-Card Schemes) sexual health services into this software programme.</td>
</tr>
<tr>
<td></td>
<td>A business case is being developed for submission to Welsh Government for capital funding.</td>
</tr>
<tr>
<td><strong>8</strong></td>
<td>Sex and Relationship Education is not addressed in this review as it is part of the Curriculum Review. However, consideration should be given to developing national information set on sexual risks which should be presented in a format accessible to a wider audience.</td>
</tr>
<tr>
<td></td>
<td>Public Health Wales has had discussions with various groups (e.g. visually impaired) to ensure that needs are identified and addressed. Through Innovate to Save, Public Health Wales is working with stakeholders to create and promote accessible digital sexual health information that will enable individuals to make an informed decision about their sexual health need so that services are used effectively.</td>
</tr>
</tbody>
</table>