Proposed relocation of Oxlow Lane and Vicarage Field sexual health clinics to Barking Community Hospital

Report of the Deputy Chief Executive & Strategic Director for Service Development and Integration

Open Report

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Summary:

The London Borough of Barking and Dagenham proposes to relocate two of its sexual health clinics (Oxlow Lane Health Centre in Dagenham and Vicarage Field Health Centre in Barking) to Barking Community Hospital, Upney Lane, Barking from 1 June 2016.

This briefing presents the Members with an overview and rationale for the proposed relocation, and the planned consultation and engagement process.

Recommendation(s)

The Committee is recommended to note the proposal to relocate the sexual health clinics at Oxlow Lane and Vicarage Field sexual health clinics to Barking Community Hospital.

Reason(s)

To assist the Council to meet its obligations to deliver nationally mandated sexual health services under the Health and Social Care Act 2012 linked to the delivery of Corporate priorities and indicators as set out in the Ambition 2020 programme, the Health and Wellbeing Strategy and the Public Health Outcomes Framework.

1. Introduction and Background

1.1 Local authorities have a legal duty to provide or commission open access sexual health services for their residents in order to prevent the spread of sexually transmitted infections (STIs)\(^1\). This includes testing, treatment and support for people with such STIs, and notification to sexual partners of people with such

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\(^1\) Open access services do not have to be within the geographical boundaries of the local authority.
infections. Local authorities must also ensure that there is access to a broad range of contraceptive devices and advice on preventing unintended pregnancy.

1.2 Genito-urinary medicine (GUM) services provide treatment, advice and support for people with sexually transmitted infections (STIs). Sexual health and reproductive services provide a range of services from basic advice and guidance in contraception and sexual health to specialist clinics such as psychosexual health advice, impotency and menopausal clinics. All services provide a range of walk-in and appointment sessions.

1.3 Given the mandatory open access nature of sexual health services, Barking and Dagenham residents may also access sexual health services at any designated service in England and Wales, for which costs are rechargeable to the Council. Sexual health services are also commissioned from local primary care providers (GP surgeries and community pharmacies) across the borough.

1.4 Free and confidential services for the screening, diagnosis and treatment of sexually transmitted infections, and comprehensive contraception and family planning services are available in hospital and primary care settings in the borough. Barking and Dagenham commissions open access GUM, contraception and reproductive services for it residents under a contractual arrangement with Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT). These services consist of two Level 3 (specialist) hubs (based at Queen’s Hospital and Barking Community Hospital) providing a comprehensive range of GUM and family planning services and two Level 2 spokes providing testing and ‘uncomplicated’ (low risk or non-invasive) contraception services in the community (Oxlow Lane and Vicarage Field health centres).

1.5 A briefing about the proposal was presented at Councillor Worby’s (the Cabinet Member for Adult Social Care and Helath) Portfolio Holder’s meeting on 22 March 2016. The decision was made for the proposal to be presented to HASSC for information whilst Public Health seeks confirmation from Legal Services as to whether or not the change denotes a “substantial change” and whether it carries a duty under Health Scrutiny to consult on the proposed changes. This decision will be known at the time of the presentation of this report at HASSC on 13 April 2016.

2. Proposal and Issues

2.1 The services proposed for relocation to Barking Hospital in June 2016 are:

- Oxlow Lane Health Centre, Dagenham, Essex RM10 7YU
- Vicarage Field Health Centre, Barking, Essex IG11 7NR

2.2 The consolidated service at Barking Hospital will support service users by providing access to a wider range of sexual health services (including specialist Level 3 provision) under one roof:

- All main methods of contraception – including emergency and long acting reversible contraceptives (LARC);
- Pregnancy testing and referral for termination (abortion) services;
- Cervical screening;
- Chlamydia, HIV and all sexually transmitted infections screening and treatment;
- Psychosexual counselling for impotence and other sexual health conditions.
3. Options Appraisal

3.1 The rationale for the proposed relocation and advantages / disadvantages are appraised (also see section 7: risk management)

3.2 Improving access to comprehensive health services
The Oxlow Lane and Vicarage Field clinics provide screening for chlamydia and gonorrhoea only (not HIV), whilst a wider range of GUM, family planning and contraceptive services and psychosocial interventions is available at Barking Hospital (see Appendix A for a comparison of services at all three venues).

3.3 It is proposed that the GUM services at the two hub clinics will be merged to provide a comprehensive ‘one stop shop’ sexual health service at Barking Hospital, with more frequent and longer opening times for appointments and walk-in sessions. Service users will also be able to benefit from better transport links, as the hospital is located right next to car parking facilities, and is less than 5-minutes’ walk from Upney train station. Several bus routes also pass through the hospital, enabling easier access to the services from all wards in the borough.

3.4 The relocation of the GUM services to Barking Hospital would also present the opportunity to improve access to evening and weekend services not currently available at Oxlow Lane and Vicarage Field health centres. The consolidated service will be available for a minimum of 40 hours per week, offer a dedicated young person’s clinic and have clinics on at least 3 evenings per week and potentially Saturday mornings.

3.5 Budgetary pressures
The costs to the Council of commissioning GUM services at several sites is significant (£1.59m in 2015/16). Due to the considerable financial pressures presented by the reductions to the Public Health Grant (2.2% in 2016/17, 2.5% in 2017/18 and 2.6% in the following two years as announced by the Department of Health in February 2016) the Council needs to find more efficient ways of delivering local sexual health services. The Council must therefore seek to rationalise existing services in order to ensure the continuation and future provision of high quality (mandated) services to meet local need. The proposed relocation enables the Council to provide cost-effective comprehensive sexual health services at one location without compromising the quality of the provision.

3.6 Efficiency savings
A new contract for integrated sexual health services in Barking and Dagenham was awarded to BHRUT in October 2015. Under the new agreement Barking, Havering and Redbridge University Trust (BHRUT) are to achieve efficiencies of 5 per cent of the initial contract value (£79,500) in each year of the 3-year contract. The costs to BHRUT of maintaining GUM services at several sites are significant. The Trust has concluded that the service is making a considerable and unsustainable loss and has itself proposed consolidating the two spokes into one site at Barking Hospital in order to bring its costs in line with its income.

3.7 The use of multiple spokes also incurs additional premises and staffing costs as well as the loss of substantial staff time in travelling between the different sites. Therefore relocating the two spokes to Barking Hospital offers the best balance between reducing service costs and maintaining service accessibility. BHRUT are
currently assessing the savings to be achieved from the relocation (including consultant / nurse / admin costs and time saved) and will submit the full report to the Council in April 2016.

3.8 **Need to deliver an efficient and cost-effective service model**
The current service design was commissioned several years ago and is based on a ‘traditional’ hub and spoke model; that is, services are delivered from multiple fixed sites with minimal use of triage to differentiate between symptomatic / high-risk patients who require full examination (who may require specialist treatment) from asymptomatic, low-risk patients who are seeking reassurance that they are problem free (and may only require advice and low-level support).

3.9 BHRUT are currently undertaking a review of the existing service model with a view to reconfiguring the current model of care in line with this approach as well as redesigning pathways to improve service user outcomes and ensure that the services remain financially viable.

3.10 **Benefits of the relocation**
Maintaining and enhancing patient/service user care whilst providing more efficient use of resources and value for money to the public purse is at forefront of the proposed relocation and continues to be the Council’s priority. Combining the services has a number of potential benefits including:

- There will be access to other sexual health services not currently provided at Oxlow Lane or Vicarage Field health centres (e.g. full STI screening);

- The comprehensive approach allows continuity of care by bringing together the expertise of BHRUT’s clinical teams in one location, linking in with other medical services on-site, and further improving patient outcomes and patient experience, and,

- Consolidating all services on one site will improve the overall efficiency and effectiveness of services by reducing BHRUT’s costs in line with its income, ensuring services are sustainable for the future, both financially and operationally.

4. **Consultation**

4.1 A briefing about the proposal was presented at Councillor Worby’s Portfolio Holder’s meeting on 22 March 2016. The decision was made for the proposal to be presented to the HASSC for information whilst Public Health seeks confirmation from Legal Services as to whether or not the change denotes a substantial change and whether it carries a duty under Health Scrutiny to consult on the proposed changes. This decision will be known at the time of the presentation of this report at HASSC on 13 April 2016.

4.2 If recommended, an appropriate period of consultation and engagement with staff and the public and other relevant stakeholders will be undertaken to consider the following issues:

- How do we minimise the inconvenience caused by the relocation of the clinics in Oxlow Lane and Vicarage Field to local residents?
• How do we make sure that the consolidated sexual health service in Barking Hospital remains accessible to those who require sexual health services, particularly those in high-risk population groups?

• How can we work better with young people and with those who most need these services?

• What services they would like to access in primary care i.e. would they prefer to go to their GP rather than Barking Hospital?

5. Financial Implications

Implications completed by: Richard Tyler, Interim Group Manager, Finance

5.1 The current contract value for GUM services provided by Barking, Havering and Redbridge University Hospital Trust (BHRUT) is £1.59m. The 2015-16 revised budget for this service is only £1.40m, requiring funding to be found from other budgets within the service to maintain the current arrangements.

5.2 A reduction in the Public Health Grant of £1.035m in 2015-16 has been followed by a proposed further reduction of 2.2% in 2016-17 (£0.411m) and 2.5% in 2017-18 (£0.439m). In total, a cash reduction of 9.6% over the period to 2019-20 has been confirmed by Department of Health. The reductions will therefore place increased pressure on service delivery. A three-year contract with BHRUT was awarded in October 2015, with efficiency savings of 5% of the contract value each year. The relocation of two sites to Barking Hospital will assist BHRUT in reducing its losses whilst offering more efficient and effective services for residents.

6. Legal Implications

6.1 A briefing about the proposal was presented at Councillor Worby's Portfolio Holder's meeting on 22 March 2016. The decision was made for the proposal to be presented to HASSC for information whilst Public Health seeks confirmation from Legal Services as to whether or not the change denotes a substantial change and whether it carries a duty under Health Scrutiny to consult on the proposed changes. This decision will be known at the time of the presentation of this report at HASSC on 13 April 2016.

7. Other implications

7.1 Risk Management - The proposed relocation presents a number of risk and issues which are mitigated below:

High / increasing levels of need for sexual health services in the borough
Barking and Dagenham has higher STI rates and poorer sexual health outcomes than other areas. Overall, rates of STIs and HIV are significantly higher in Barking and Dagenham than in Havering, Redbridge and England as a whole. Although decreasing, the rates of teenage conception are higher in Barking and Dagenham than the London and national averages. Abortion and repeat abortion rates are also comparatively high in the borough (see Appendix B for performance indicators).
Certain population groups have poorer sexual health outcomes; these include:

- **Young people** - (Just under half of all cases of STIs detected in GUM clinics are in people aged 15-24);

- **Men who have sex with men (MSM)** - Just under 20 percent of cases are in men who have sex with men;

- **Black ethnic groups** - Rates of new STI cases diagnosed in GUM services are almost three times higher (>1700/100,000) for Black ethnic groups than that for White groups (<560/100,000), and,

- **Disadvantaged communities** – the rate of new STI infections is two to three times higher in the most deprived populations compared to least deprived quintiles.

**Mitigating actions**: An equalities impact assessment will be undertaken prior to the proposed relocation to ascertain whether and how protected characteristics and high-risk population groups will be affected by the proposed change.

**Increased demand for services at Barking Hospital**

There is a need to ensure that there is sufficient capacity at the hospital to manage increased activity and prevent people being turned away from the walk-in service or experiencing lengthy waits for appointments. (See activity levels at Oxlow Lane and Vicarage Field in Appendix C).

**Mitigating actions**: The Council is currently exploring opportunities to reduce demand (and costs) at GUM clinics by maximising family planning services in primary care. Nationally, approximately 80% of all contraceptive services are provided by GPs. GP responsibilities for contraceptive care include the fitting of LARC. A significant proportion of specialist family planning services currently provided in Level 2/3 clinics could be provided by GPs, with specialist services at Barking Hospital being targeted at women with specialist health needs or those who are reluctant or unable to attend their GP for contraceptive services.

Better promotion of sexual health services in GP surgeries and community pharmacies would also increase the numbers of people accessing primary care provision.

The Council is also exploring a variety of ways of increasing service capacity at minimal cost whilst ensuring that patients can be seen quickly and conveniently in the most appropriate setting. Community-based solutions and other innovative approaches such as single web-based triage systems for GUM services have the potential to reduce attendances at GUM services. The development of ‘express clinic’ models – usually for asymptomatic, low-risk patients who self-sample (urine / swab) on attendance and/or have bloods taken by a Health Care Assistant and thereafter can phone for their results and/or receive them by text offers possibilities to manage demand. Furthermore, initiatives such HIV home testing for

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2 LASAR report, 2014
3 All Party Parliamentary Pro-Choice and Sexual Health Group, A report into the delivery of sexual health services in general practice, October 2007.
asymptomatic, low-risk service users will ensure that only symptomatic patients are required to attend the Level 3 services.

**Reduced accessibility**
There may be concerns raised that the relocation will reduce access to sexual health services for those residing in the proximity of the Oxlow Lane and Vicarage Field health centres, particularly the closure of the young person’s clinic at Oxlow Lane on Tuesdays at 2pm – 4.45pm.

**Mitigating actions**: To reduce the impact, a walk-in clinic will be provided for under 20-year-olds at Barking Hospital on Mondays at 4pm – 6.30pm meaning that young people can access the service outside of school/college hours. All existing opening times, appointments times and drop-in sessions for services at Barking Community Hospital are being reviewed by BHRUT to ensure that there is sufficient capacity to meet demand.

Furthermore, the implementation of rapid HIV testing at GP surgeries across the borough from 1 April 2016 and future opportunities to introduce home testing will also necessitate fewer attendances at Barking Hospital and less need to travel to the Level 3 service, particularly for those with uncomplicated STIs and contraceptive services.

**Increased travel times for residents in the areas currently served by Oxlow Lane and Vicarage Field**
There may be concerns raised that residents in the areas currently served by Oxlow Lane and Vicarage Field health centres will have further to travel to reach the sexual health services. The table below shows the approximate travel times between the two clinics and Barking Community Hospital (BCH):

<table>
<thead>
<tr>
<th>Clinic</th>
<th>Distance to BCH</th>
<th>Car</th>
<th>Train</th>
<th>Bus</th>
<th>Walk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oxlow Lane</td>
<td>3.3 miles</td>
<td>15 mins</td>
<td>30 mins</td>
<td>40 mins</td>
<td>55 mins</td>
</tr>
<tr>
<td>Vicarage Field</td>
<td>1.5 miles</td>
<td>7 mins</td>
<td>10 mins</td>
<td>15 mins</td>
<td>25 mins</td>
</tr>
</tbody>
</table>

**Mitigating actions**: Although the range of public transport to and from Barking Hospital would maximise accessibility to the consolidated service, the Council will seek to minimise the inconvenience caused by the increased travel times to the hospital for residents for whom Oxlow Lane clinic is more accessible by exploring opportunities to make GP surgeries more comprehensive and accessible in those areas, particularly as this is the preferred provider of contraception for the majority of women in Barking and Dagenham.

The Council is currently exploring opportunities to develop alternative comprehensive sexual health provision in primary care with GP surgeries that have expressed an interest, such as Urswick Medical Centre in Dagenham (1.8 miles from Oxlow Lane clinic). There may also be opportunities to deliver comprehensive sexual health services from the Broad Street Medical Centre in Dagenham (1.4 miles from Oxlow Lane clinic).
7.2 **Contractual Issues**
A new contract for integrated sexual health services in Barking and Dagenham was awarded to BHRUT in October 2015. Under the new agreement BHRUT are to achieve efficiencies of 5 per cent of the initial contract value (£79,500) in each year of the 3-year contract. The costs to BHRUT of maintaining GUM services at several sites are significant. The Trust has concluded that the service is making a considerable and unsustainable loss and has itself proposed consolidating the two spokes into one site at Barking Hospital in order to bring its costs in line with its income.

7.3 **Staffing Issues**
BHRUT staff will be consulted in regards to the proposed relocation.

7.4 **Customer Impact**
The Council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010).

The Council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons’ disabilities, and encourage people to participate in public life. The Council must have due regard to the need to tackle prejudice and promote understanding.

An equalities impact assessment will be undertaken prior to the proposed relocation to ascertain whether / how protected characteristics and high-risk population groups will be affected by the proposed change.

7.5 **Safeguarding Children**
Sexual health clinics provide expert advice, support and interventions to young people. They are uniquely placed to identify the sexual health needs of young people, parents and families (including safeguarding needs) and refer or direct them to existing local services, thereby promoting early intervention.

7.6 **Health Issues**
To improve the sexual health outcomes of local residents, breaking the link between disadvantage and poor outcomes throughout life is integral to the delivery of our joint Health and Wellbeing Strategy. The Council’s vision and priorities for Barking and Dagenham are intended to reflect the changing relationship between the Council, partners and the community, and our role in place shaping and enabling community leadership within the context of a significantly reducing budget.

7.7 **Crime and Disorder Issues**
None.

7.8 **Property / Asset Issues**
None.
Background Papers Used in the Preparation of the Report:
None.

List of appendices:

Appendix A  Comparison of services provided at each clinic
Appendix B  Indicators of sexual and reproductive health (2014)
Appendix C  Activity at Oxlow Lane & Vicarage field clinics (2014/15)