

Joint Public Health Board

16 February 2022 Clinical Services Performance Monitoring For Decision

Portfolio Holder: Cllr P Wharf, Adult Social Care and Health, Dorset Council
Cllr M Iyengar, Tourism and Active Health, Bournemouth,
Christchurch and Poole (BCP) Council

Local Councillor(s): All

Executive Director: Sam Crowe, Director of Public Health

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Report Status: Public

Recommendations:

The Joint Board is asked to consider the information in this report and to note the performance and changes in relation to drugs and alcohol, and sexual health.

Reason for Recommendation:

Close monitoring of performance will ensure that clinical treatment services deliver what is expected of them and that our budget is used to best effect.

1. Executive Summary

This report provides a high-level summary of performance for drugs and alcohol and sexual health services, with supporting data in appendices.

A report on clinical treatment services performance is considered every other meeting.

- 2. Financial Implications**
None
- 3. Climate implications**
No direct implications.
- 4. Other Implications**
N/A
- 5. Risk Assessment**
Having considered the risks associated with this decision, the level of risk has been identified as:
Current Risk: LOW
Residual Risk: LOW
- 6. Equalities Impact Assessment**
An Equalities Impact Assessment is not considered necessary for this agreement.
- 7. Appendices**
Appendix 1 – Substance Misuse Dashboard February 22
Appendix 2 – Sexual Health Dashboard February 22
- 8. Background Papers**
Previous reports to the JPHB.
[From harm to hope: A 10-year drugs plan to cut crime and save lives - GOV.UK](https://www.gov.uk/government/news/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives)
www.gov.uk

1. Background

- 1.1 The Joint Public Health Board reviews performance of commissioned services on a six-monthly basis. This report focuses on our core treatment services for drugs and alcohol and for sexual health and associated services commissioned from pharmacies.
- 1.2 Alongside this the Board also receives regular updates against the Public Health Dorset Business Plan to monitor progress against agreed deliverables.

2. Drugs and Alcohol

- 2.1 BCP Council is responsible for commissioning all of its drug and alcohol services, with the exception of pharmacy services for needle exchange and supervised consumption. Public Health Dorset are responsible for commissioning all services for residents in the Dorset Council area and pharmacy services.
- 2.2 A new national drug strategy was published in December 2021, *From harm to hope: A 10-year drugs plan to cut crime and save lives*. This focuses on three priorities: enforcement activity to break drug supply chains; delivering a world class treatment and recovery system; and achieving a generational shift in the demand for drugs.
- 2.3 The strategy announces an additional £780m to fund the first three years of the strategy, and this will be allocated based on need over the next three years. There has been confirmation that the universal grant money which was awarded to local authorities in April 2021 for a 15-month period to provide additional support for those in contact with the criminal justice system will be extended for a further three years. Further information about additional allocations is awaited, but some local authorities will not receive any additional funding above and beyond the universal grant funding until year 3 of the strategy.
- 2.4 The new strategy requires local areas to have a strong partnership which brings together all the relevant organisations and key individuals, and to provide a single point of contact for central government. The partnership could cover one local authority or several, but it must have proactive oversight of the implementation of all three strategic priorities of the strategy and make sure that local organisations work together and jointly agree provision and where they can improve. Both BCP and Dorset Council are currently considering the implications of this and appropriate partnership arrangements.

- 2.5 The impacts of the COVID-19 pandemic are still being felt within the treatment system with delays in access for inpatient detoxification and residential rehabilitation. This may also have had an impact on the rate of hospital admissions for alcohol which continue to rise locally in line with the national picture. A new inpatient detoxification unit has opened in Fareham in January 2022 as part of a regional solution to this problem, and both Dorset and BCP Council have allocated numbers of bed nights which will have a positive impact on waiting times.
- 2.6 The pandemic has also affected testing for blood borne viruses and immunisation as fewer patients have been seen face to face. Dorset and BCP Councils have work underway to address this. Young people have been adversely affected by the pandemic. BCP and Dorset Councils have seen a decline in the numbers of young people accessing tier 3 services.
- 2.7 Drug related deaths remain a priority locally, and despite the pandemic the number of deaths has remained stable in the past few years. The Pan-Dorset Drug Related Death Panel continues to meet regularly to review and learn from all deaths.
- 2.8 Key issues related to service performance are presented for each of the councils below.

BCP Council

- 2.9 Services in BCP were recommissioned during 2021, with service implementation in November 2021. There is now a single provider, We Are With You. New presentations for alcohol continue to rise.
- 2.10 The number of opiate users engaged in treatment in the BCP Council area has slightly reduced after a sustained period of growth over the last few years.
- 2.11 Opiate completion rates in BCP Council remain low as the overall number of people in treatment increases, the proportion of those in long term treatment remains below the national average as a result of the large influx of new clients in the past 18 months.

Dorset Council

- 2.12 Overall numbers of people in treatment remains stable although there has been a drop in those presenting to treatment and this will be monitored.
- 2.13 There are some early signs of an improvement in completion rates across the board. Completion rates are comparable to national averages.
- 2.14 The proportion of those in long-term treatment mirrors the national picture, and while hospital admissions remain lower than the national average they are increasing.

3. Sexual Health

- 3.1 The overall summary in 2020 shows that diagnosis rates for new sexually transmitted infections (STIs) (excluding Chlamydia in the under 25s) per 100,000 aged 15 to 64 years are below the England average.
- 3.2 Sexual health services in Dorset have adopted a targeted approach to chlamydia screening focusing on areas of greater need in line with national recommendations for the programme. Screening activity was slightly lower in 2020 in both Council areas due to service restrictions during the pandemic. The proportion of 15-24 year olds screened in Bournemouth, Christchurch and Poole is higher than the England average, and diagnosis rates for Chlamydia are above the England rate for BCP Council, and similar to the rate for England in the Dorset Council area.
- 3.3 The diagnosis rate of Gonorrhoea had been increasing locally since 2016 in line with a national rise. Diagnosis rates levelled off in 2020 in the BCP Council area and fell in the Dorset Council area. Diagnosis rates in both Councils are lower than the England average at 79.9 and 19.0 infections per 100,000 population respectively compared to 100.9 for England. Between 2014 and 2018 there was a steady increase in syphilis infection rates in England, and infections also rose during this period in both Council areas. Figures for 2020 show a fall in diagnoses in BCP Council to below the England rate, while Dorset Council continued to show a small increase. Rates in 2020 were 12.25 for England, and 7.81 and 5.79 respectively per 100,000 population for BCP and Dorset Councils.
- 3.4 Conception rates among females aged under 18 have continued to fall nationally over the period 2014 to 2019. BCP Council rates tend to mirror the national rate. However in more recent years, the rate for Dorset Council has stopped falling, and was slightly higher than the BCP council rate in 2019. Both Councils had under 18 conception rates below the rate for England in 2019 (13.78 for Dorset Council, and 12.8 per 1,000 females aged 15-17).
- 3.5 The prevalence rate for HIV in 2020 was 2.7 per 1000 population in Bournemouth, Christchurch and Poole, which was higher than the England rate (2.3 per 1,000). Rates for new HIV diagnoses in Dorset Council (0.83 per 1,000) are below the England rate for 2020. In 2020 data showed that HIV new diagnosis rates fell overall. Overall, late diagnosis for HIV has improved since 2011 as people are presenting and getting tested earlier and awareness of clinical indicators for HIV among care professionals has improved.
- 3.6 Sexual Health Dorset (SHD) are improving access to sexual health services online, and have commissioned SH:24 as a digital service for all residents. SH:24 provide online testing, postal chlamydia treatment, oral contraception

and remote clinic support for 16 and 17-year-olds. Feedback to date suggests that 45 per cent of users are under 25 years, 90 per cent of those testing positive opt for the online chlamydia treatment service, and this frees up capacity in the service for face to face clinical work. User feedback suggests the service is easy to use to order testing and treatment kits (98 per cent), people felt that they were given enough information and support (97 per cent) and results came back quickly (98 per cent) giving peace of mind.

- 3.7 SHD established a new Pre-Exposure Prophylaxis (PrEP) service this year, supported by new funding via NHS England and the public health Grant. This supports people to reduce their risk of acquiring HIV through pre-exposure drug treatment. The first patient cohort is being managed effectively and an equity audit has been undertaken recently to identify which groups access the service and which groups remain underserved. The outcomes of the audit will be the focus for a targeted promotional programme to improve awareness, PrEP access and support for key groups such as BAME communities, gay and bisexual communities that are new to the area and sex workers. The next stage will be for SHD to develop communication strategies to raise awareness, understanding and encourage access to PrEP by working with other settings such as schools and universities, as part of phase two roll out. HIV testing week this month will be an opportunity to promote the service among priority groups.
- 3.8 Schools continue to play a key part in improving sexual health for young people and the recovery programme work with schools is well underway following a pause during COVID. The Children and Young People's Public Health Service continue to work with Sexual Health Dorset to identify priority schools each year to assess needs and educational support for sexual health. A CHAT health digital programme is already established in schools and this month a new sexual health module was launched to improve digital access and support for young people.

4. Conclusion and recommendations

- 4.1 This paper provides a high-level summary in narrative form. Appendices include supporting activity data and information, with more in-depth information available on request. The Joint Public Health Board is asked to note the performance data in this report.

Sam Crowe
Director of Public Health