London sexual health service mapping
Results & analysis

Medical Foundation for AIDS & Sexual Health
(MedFASH)
for
London Sexual Health Programme

Published online November 2008
The London sexual health needs assessment and service mapping project

This report is one of four outputs from the first sexual health needs assessment and service mapping undertaken across London, which was managed by the Medical Foundation for AIDS & Sexual Health (MedFASH) between January and November 2008.

The project was established to assist the NHS in London in its task of further developing and delivering high quality and world class sexual health services. As such, it set out to provide a detailed picture of sexual health needs and the current commissioning and configuration of sexual health services. It also aimed to pilot Sexual health needs assessments (SHNA): a how to guide (Design Options/NHS, 2007) and provide national learning for the Department of Health (DH) about the process of undertaking a regional needs assessment and service mapping.

The project was commissioned by Lambeth Primary Care Trust (PCT) on behalf of London PCTs for the London Sexual Health Programme. It was jointly funded by the DH Sexual Health Policy Team, the DH National Support Team for Sexual Health and the London Sexual Health Programme. In managing the project, MedFASH commissioned the London Health Observatory (LHO) which worked with the Health Protection Agency (HPA) to produce the needs assessment. Both the LHO and the HPA deployed additional resources to support the project, notably the considerable time devoted to the needs assessment by many staff at the HPA Centre for Infections and London Regional Epidemiology Unit, and to the development of the web tool by the LHO project team.

A Project Advisory Group, whose membership was drawn from commissioners and providers across London, offered expert advice and guidance throughout the project.

The following project reports were published by MedFASH in November 2008.


Report 3: Sex and our city: project findings & recommendations for London. This report by MedFASH combines the findings of the needs assessment and service mapping, and makes recommendations for the NHS in London.

In addition, the London Health Observatory produced an interactive web tool enabling comparison between sexual health indicators at London borough level, and a workbook with supplementary tables. The web tool can be accessed at the LHO website (www.lho.org.uk).

All three reports are available to download as pdfs on the LHO (www.lho.org.uk) and MedFASH (www.medfash.org.uk) websites.

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The views expressed in the project’s publications are those of the authors and not necessarily those of the Department of Health.

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Acknowledgements

This report has been made possible thanks to the support, engagement and willing contributions of all 31 Primary Care Trusts in London and the NHS and non-NHS organisations who deliver sexual health services there.

Thanks are also due to the members of the Project Advisory Group (listed at Appendix 3) who provided valuable guidance and expert advice at all stages of the project.

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Executive Summary

This report constitutes the first pan-London sexual health service mapping. There was a 100% response to all questionnaires sent out, which clearly demonstrates a high level of support and engagement from both commissioners and providers of services. This response rate and the level of data collected mean that the strength of the report is in the detail it affords on services commissioned and provided in London in 2007/08.

This report, London sexual health service mapping, is published online by MedFASH and freely available to download. In the interests of fair and open competition, it does not contain any information that would be considered by the NHS as commercially sensitive. Additional financial information collected from PCTs through the service mapping has been compiled in an expanded version of the report, submitted in confidence to PCT chief executives only.

It is within the scope of this report to highlight key emerging themes from the service mapping. A subsequent report, Sex and our city, draws together findings from this report and from London sexual health indicators, the pan-London sexual health needs assessment undertaken for MedFASH by the London Health Observatory with the Health Protection Agency. Sex and our city concludes by making a number of recommendations for London.

Whilst there were a number of limitations to the service mapping project, its findings highlight a number of issues of significance for London, its PCTs, their commissioners and the large number of providers of services, both NHS and non-NHS. These include:

1. variable commissioning capacity
2. variable use of tools to define need and direct local sexual health service provision
3. poor use of detailed service specifications in the commissioning of services
4. wide-ranging variance in understanding of contracts, resulting in evidence of mismatches in services commissioned and services provided
5. significant financial variance in spend on services across PCTs
6. significant variation in activity and access across providers and between services
7. significant limitations in the availability of service level data
8. the growing role of non-NHS providers in service delivery
9. poor understanding of the role of clinical networks.

It is each PCT’s responsibility to understand the sexual health needs of its population and strive towards world class commissioning of services to meet those needs. In a competing healthcare arena where sexual health spend accounts for approximately 1% of PCT budgets, the variance in commissioning capacity across London is not surprising.

There are a number of important issues to emerge from this report that require urgent attention, including the implementation of fit for purpose IT systems to enable the collection of service level data, and the development and implementation of a tariff for contraceptive services.

Findings in this report may support an increased leadership role for the London Sexual Health Programme. The programme has the capacity to support PCTs as they strive towards delivery of world class services through:

- supporting commissioning development and capacity
- the development of standard service specifications
- the development of standard contracts

Ultimately, findings in this report would endorse the potential of sexual health services to be commissioned collaboratively, either in localities, networks or on a pan-London basis.
1 Introduction

1.1 The report
This report sets out the findings from the first sexual health service mapping undertaken across London, managed by the Medical Foundation for AIDS & Sexual Health (MedFASH) for the London Sexual Health Programme. It is one of four outputs from a project undertaken between January and October 2008 (see page 2).

The report provides baseline information for 2007/08 on the sexual health commissioning of all 31 PCTs across London, including financial data and details of sexual health services delivered by specialist providers.

This report, *London sexual health service mapping*, is published online by MedFASH and freely available to download. In the interests of fair and open competition, it does not contain any information that would be considered by the NHS as commercially sensitive. Additional financial information collected from PCTs through the service mapping has been compiled in an expanded version of the report, submitted in confidence to PCT chief executives only.

1.2 Background
London has the highest rates of sexual ill health in the UK, impacting disproportionately on public health and health service finances in the capital. Sexual health services are complex in London and show varying performance against current indicators. Access to services is a priority in the NHS Operating Framework for 2008/09. The London Sexual Health Programme and the DH reviewed the challenges and complexities faced by commissioners in London and identified the need for more information, across London, on sexual health services currently commissioned and provided. This will support PCTs in identifying gaps in their current commissioning, and facilitate world class commissioning of sexual health services.

1.3 Content of report
The service mapping sought to identify the complex commissioning arrangements that exist for sexual health services in London. This report sets out baseline financial information and commissioning frameworks by PCT in 2007/08 and triangulates this with information from sexual health service providers.

An analysis is made of the ways in which commissioning is undertaken and by whom. This includes comparisons of financial allocations across PCTs, services provided, access, and plurality of providers within local and clinical network areas. This will assist equity benchmarking.

Finally, the report sets out to highlight key themes emerging from the data, including issues facing commissioners, providers and potential users of services.

1.4 Parameters of the project analysis
This report is aimed at supporting PCTs in their future commissioning of sexual health services and supporting NHS and non-NHS providers of sexual health services in working with PCTs to develop services.

Analysis was undertaken to identify high-level emerging themes. More detailed local (PCT) level analysis is not included in the report, but data gathered in the course of the project are presented in the appendices for further analysis.
The data in this report were submitted by commissioners and providers in response to questionnaires. Where inconsistencies were picked up, verification was sought from respondents. However, the scope of the project did not allow for full auditing of the data or verification against published sources. Further limitations and other issues impacting on the analysis are explored in Section 4.

The findings of the service mapping, along with those from the data-driven sexual health needs assessment, are drawn together in the final project report, *Sex and our city*. It makes a number of recommendations for London, based on findings from both reports.
2 Methods

The sexual health service mapping collected data firstly from PCTs and then from service providers. A separate questionnaire was used for each group (Appendices 1 and 2). All those completing questionnaires were asked for data from the financial year 2007/08. Information was then triangulated.

For the purposes of this project, sexual health services included: Genitourinary Medicine (GUM), Community Sexual and Reproductive Health (CSRH), abortion, enhanced services in general practice, pharmacy-based services, the National Chlamydia Screening Programme (NCSP) and locally-commissioned primary prevention of sexually transmitted infections (STIs) and HIV. Excluded from the project were HIV treatment and care services, pan-London commissioned HIV prevention work, services specifically commissioned to address teenage pregnancy, health promotion activities (other than primary prevention) and services commissioned by local authorities unless they were healthcare services jointly commissioned with PCTs.

Both questionnaires were specifically developed for the purposes of the project with expert commissioning and clinician support provided by members of the Project Advisory Group (Appendix 3). For the commissioning questionnaire, the Health Protection Agency Centre for Infections developed the question relating to STI/HIV prevention (question 21). The National Chlamydia Screening Programme team developed the question relating to chlamydia screening (question 18) and drafted the sub-sections to questions asking for relevant data.

Definitions of Levels 1, 2 and 3 services were adapted for the purposes of the project (Appendix 4) by members of the Project Advisory Group based on those published in the National Strategy for Sexual Health & HIV. The PCT commissioning questionnaire (Appendix 1) was piloted in three PCTs. The service provider questionnaire (Appendix 2) was piloted in two GUM and two CSRH services. Both questionnaires were amended to reflect the learning from the pilots.

The commissioning questionnaire collected data on the commissioning structure, the use of local data on which to base commissioning intentions, the financial allocations across the breadth of sexual health, the services and providers commissioned in 2007/08 and new investments/additional commissioning plans for 2008/09. Responses were received from all 31 PCTs.

The commissioning questionnaire was distributed first. Responses received from this questionnaire identified NHS and non-NHS providers of Level 1, 2 and 3 sexual health services. All NHS providers of Level 2 and 3 services were then asked to complete the provider questionnaire. This questionnaire collected data on the services provided in 2007/08 including information on access, activity, clinical services offered (Levels 1, 2 and 3), governance arrangements and anticipated service changes for 2008/09. Responses were received from all 29 London GUM services and all 30 PCT-based CSRH services.

In addition, Brook and Terrence Higgins Trust, the two most frequently contracted non-NHS providers of services at Level 2 and/or 3 as identified in the commissioning questionnaire responses, provided service level data. Each of these organisations was asked for information on access, activity, clinical services offered (Levels 1, 2 and 3) and service changes for 2008/09.

The principle providers of abortion services across London, Marie Stopes International (MSI) and the British Pregnancy Advisory Service (BPAS), also provided details of the contracts they held with PCTs in 2007/08.

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The data returned by all PCTs and providers were imported into standardised data sheets. These were returned to all those who had completed questionnaires for verification and in some cases for further information or clarification of data anomalies. The data sheets are included in Appendices 8, 9 and 10.
3 Results - commissioning questionnaire

3.1 Primary care trusts

All 31 London PCTs were sent a commissioning questionnaire and there was a 100% response rate.

3.2 General Information

There were significant variations in where responsibility for sexual health sat within the PCT structure with three common models: Commissioning 39% (12 PCTs), Public Health 23% (seven PCTs) and both Commissioning and Public Health 29% (nine PCTs). In the remaining 9% (three PCTs), responsibility sat within Strategy and Planning, or Service and Systems Development, or was shared between Commissioning, Public Health, Finance and Primary Care.

There were wide variations in the roles of those responsible for sexual health commissioning, with only seven PCTs (Camden, Greenwich, Hammersmith & Fulham, Lambeth, Tower Hamlets, Southwark, Westminster) having designated posts which were wholly dedicated to sexual health & HIV. Of these seven PCTs, two (Lambeth and Southwark) shared a dedicated commissioner.

Of the remaining 24 PCTs, the roles of those responsible for sexual health commissioning varied, as did the percentage of their time dedicated to sexual health commissioning. However, only four of the 24 commissioners dedicated more than 50% of their time to sexual health, while nine spent 25% or less. Data relating to staff time dedicated to sexual health commissioning were not provided by three PCTs.

3.3 Sexual health needs assessment and sexual health strategy

26 (84%) of the PCTs had undertaken a form of sexual health needs assessment in the last three years. Of the remaining five PCTs, four (13%) had never undertaken a sexual health needs assessment (Haringey, Hillingdon, Sutton & Merton and Waltham Forest) and one (3%) had not done so since 2002 (Lewisham).

Between the 26 PCTs which had completed a needs assessment within the last three years, there was significant variation in the complexity of the assessment. Eight were reported as being comprehensive, five as rapid, and nine as service-targeted, while four were Joint Strategic Needs Assessments that included sexual health.

In 22 (71%) of the PCTs, a sexual health strategy had been written or reviewed within the last three years. Five PCTs (16%) had no written sexual health strategy (Barking & Dagenham, Croydon, Ealing, Havering and Waltham Forest) and four (6%) had a strategy that had not been reviewed in the past three years (Bexley, Enfield, Haringey and Richmond & Twickenham).

One PCT (Waltham Forest) had not performed a sexual health needs assessment nor written a sexual health strategy.

3.3 Use of service specifications

Service specifications were in use in 22 (71%) of the PCTs although, in almost all PCTs, they were not utilised for all of the different services commissioned. Six PCTs (19%) did not use any service specifications in 2007/08 (Bexley, Enfield, Haringey, Hillingdon, Hounslow and Sutton & Merton) and information was not provided by three PCTs (10%).
Table 1 provides details of the numbers of PCTs using different types of service specifications in 2007/8.

**Table 1: Use of service specifications by PCTs (2007/08)**

<table>
<thead>
<tr>
<th>Services</th>
<th>No of PCTs using specification</th>
<th>% of all 31 PCTs using specification</th>
</tr>
</thead>
<tbody>
<tr>
<td>GUM services</td>
<td>13</td>
<td>42%</td>
</tr>
<tr>
<td>CSRH services</td>
<td>13</td>
<td>42%</td>
</tr>
<tr>
<td>Enhanced services in general practice</td>
<td>5</td>
<td>16%</td>
</tr>
<tr>
<td>Abortion services</td>
<td>12</td>
<td>39%</td>
</tr>
<tr>
<td>Pharmacy-based sexual health services</td>
<td>5</td>
<td>16%</td>
</tr>
<tr>
<td>National Chlamydia Screening Programme (NCSP)</td>
<td>12</td>
<td>39%</td>
</tr>
<tr>
<td>STI/HIV prevention services</td>
<td>11</td>
<td>35%</td>
</tr>
<tr>
<td>Other voluntary/third sector services</td>
<td>9</td>
<td>29%</td>
</tr>
</tbody>
</table>

### 3.4 Total spend on identified sexual health services, 2007/08

There was significant variation in the absolute spend on sexual health services and the percentage of the total PCT budget that this represented. The total spend on sexual health services by PCT in 2007/8 is shown in detail in the financial summary at Appendix 5. This identifies a 20-fold variation in total spend (£646,452 to £12,610,277) which was reflected as a 13-fold variation in percentage of total PCT budget (0.23% to 2.99%).

The mean total spend on sexual health services was £4,180,738 which represented a mean of 1.07% of the total PCT budgets. Almost two-thirds of PCTs (61%, 19) spent less than 1% of their total budgets on sexual health services and only one PCT (Camden) spent more than 2.5% of its total budget on sexual health.

### 3.5 Funding allocations for sexual health services

Table 2 summarises the funding allocations for the various components of sexual health provision as identified within the remit of the project.

The table highlights considerable variation in the proportionate allocations across services and distinct variation in the commissioning and funding of services across the 31 PCTs. Not all PCTs commissioned all of the identified services for their population.
### Table 2: Funding allocations for sexual health services, 2007/08

<table>
<thead>
<tr>
<th>Service</th>
<th>No of PCTs commissioning (%)</th>
<th>Mean total spend (range)</th>
<th>Median % spend of sexual health budget (range)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GUM</td>
<td>29 (94%)</td>
<td>£2,311,623 (£0-£9,558,972)</td>
<td>47% (0-81%)</td>
</tr>
<tr>
<td>CSRH</td>
<td>31 (100%)</td>
<td>£703,028 (£63,790-£2,294,000)</td>
<td>14% (4-51%)</td>
</tr>
<tr>
<td>Other sexual health services</td>
<td>20 (65%)</td>
<td>£136,080 (£0-£810,00)</td>
<td>2% (0%-19%)</td>
</tr>
<tr>
<td>Abortion</td>
<td>31 (100%)</td>
<td>£556,096 (£141,800-£996,066)</td>
<td>16% (3%-54%)</td>
</tr>
<tr>
<td>Enhanced services in general practice</td>
<td>18 (58%)</td>
<td>£53,684 (£0-£346,510)</td>
<td>1% (0%-15%)</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>24 (77%)</td>
<td>£34,112 (£0-£125,000)</td>
<td>1% (0%-3%)</td>
</tr>
<tr>
<td>NCSP</td>
<td>31 (100%)</td>
<td>£126,413 (£1,241-£436,357)</td>
<td>3% (&lt;1%-20%)</td>
</tr>
<tr>
<td>Primary STI and HIV Prevention</td>
<td>30 (97%)</td>
<td>£259,702 (£0-£914,000)</td>
<td>5% (&lt;1%-20%)</td>
</tr>
</tbody>
</table>

### 3.6 Genitourinary Medicine (GUM)

In 2007/08, GUM services were ‘hosted’ and therefore funded by PCTs according to their location. Of the 31 PCTs, four (Bexley, Islington, Lewisham and Richmond & Twickenham) did not host GUM services. Three of these PCTs (Bexley, Islington and Lewisham) had no spend against GUM provision. Richmond & Twickenham PCT contracted with a provider unit outside of the PCT.

Camden PCT ‘hosted’ three GUM services (two providers). Croydon PCT identified that it had both ‘hosted’ a GUM service and paid for GUM services outside the PCT under block contract arrangements.

Of the 27 PCTs hosting GUM services in 2007/08, all contracted services from NHS providers, of which 25 were acute trusts and four were PCT provider arms. All stated that they commissioned services at Levels 1, 2 and 3.

### 3.7 Community Sexual and Reproductive Health (CSRH)

In 2007/08 Community Sexual and Reproductive Health (CSRH) services, also known as community contraceptive services (CCS), were commissioned by all 31 PCTs. As with GUM services, these were funded by PCTs according to their location.

Lambeth PCT commissioned two NHS providers of CSRH. Three NHS CSRH services were commissioned by more than one PCT: Westminster services by four, and Camden and Havering each by two.

All 31 PCTs contracted CSRH services from NHS providers, and one PCT (Brent) reported that in addition it contracted with an independent provider, Marie Stopes International (MSI), to provide vasectomies. (The contracting of other non-NHS providers of contraception and STI services was
reported under ‘other sexual health services’ - see below.) Of the NHS providers, 25 were PCT provider services and three were acute trusts.

Twenty-two PCTs (71%) stated that they commissioned services at Levels 1, 2 and 3, eight (26%) that they commissioned them at Levels 1 and 2 (Barking & Dagenham, Havering, Hounslow, Kingston, Lambeth, Newham, Redbridge, Richmond & Twickenham) and just one (Bexley) that it only commissioned services at Level 1. (Lambeth PCT commissioned two CSRH services, one at Levels 1, 2 and 3 and the other at Levels 1 and 2.)

3.8 Other sexual health services

In 2007/08, 20 (65%) of the 31 PCTs commissioned ‘other’ sexual health services. In most cases these were commissioned in addition to the GUM and CSRH services detailed above.

Most PCTs described these services as having distinct target groups. Eight PCTs stated they commissioned dedicated young people’s services, one commissioned a Haven Sexual Assault Referral Centre and one a service for female commercial sex workers. 10 PCTs did not state target groups of the commissioned services. Services were commissioned from a variety of providers: eight NHS and 15 non-NHS (12 contracts with Brook and three with the Terrence Higgins Trust). In seven cases the provider was unspecified.

Of the PCTs commissioning ‘other’ sexual health services, the majority (12) held a single contract with an ‘other’ provider.

Information was provided by 15 of the PCTs on the level of service these providers were commissioned to deliver and this is set out in Table 3.

Table 3: Levels of service for ‘other’ sexual health services, 2007/08

<table>
<thead>
<tr>
<th>Level of services commissioned</th>
<th>No of PCTs (n=15)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1 family planning/contraception</td>
<td>4</td>
</tr>
<tr>
<td>Level 1 family planning/contraception &amp; Level 1 STI testing and treatment</td>
<td>1</td>
</tr>
<tr>
<td>Levels 1 and 2 family planning/contraception</td>
<td>3</td>
</tr>
<tr>
<td>Levels 1 and 2 family planning/contraception &amp; Level 1 STI testing and treatment</td>
<td>1</td>
</tr>
<tr>
<td>Levels 1 and 2 family planning/contraception &amp; Levels 1 and 2 STI testing and treatment</td>
<td>4</td>
</tr>
<tr>
<td>Levels 1, 2, and 3 family planning/contraception &amp; Levels 1 and 2 STI testing and treatment</td>
<td>2</td>
</tr>
<tr>
<td>Levels 1 and 2 STI testing &amp; treatment</td>
<td>1</td>
</tr>
</tbody>
</table>

3.9 Abortion services

All 31 PCTs commissioned abortion services in 2007/08. Seventeen PCTs (55%) contracted with the NHS and the independent sector, 12 (39%) solely with the independent sector and two (City &
Hackney and Kensington & Chelsea) solely with the NHS. Seven PCTs stated they commissioned a central booking service.

A variety of different contract types were in use, including Payment by Results (PbR), indicative cost, cost and volume, and capped activity. The majority of PCTs had contracts with more than one provider: 13 (42%) with two providers and 11 (35%) with three or more.

In addition to abortion services, 11 PCTs (35%) as part of their abortion contracts commissioned contraceptive services, including the fitting of long-acting reversible contraception (LARC). Two PCTs also commissioned chlamydia screening as part of their abortion contracts.

### 3.10 Enhanced services in general practice

18 (58%) of the 31 PCTs commissioned enhanced services in general practice via a variety of contract types: PMS, LES and NES. The contracts were predominantly for the fitting of long-acting reversible contraception (LARC).

Details were provided by 12 PCTs on the types of enhanced services commissioned. These are shown in Table 4.

**Table 4: Levels of service for ‘non-GMS sexual health services’**

<table>
<thead>
<tr>
<th>Enhanced services in general practice and level of services commissioned</th>
<th>No of PCTs (n=12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1 family planning/contraception</td>
<td>1</td>
</tr>
<tr>
<td>Level 2 family planning/contraception (LARC)</td>
<td>9</td>
</tr>
<tr>
<td>Level 1 STI testing and treatment</td>
<td>1</td>
</tr>
<tr>
<td>Level 1 chlamydia screening only</td>
<td>1</td>
</tr>
<tr>
<td>Levels 1 and 2 STI testing and treatment</td>
<td>2</td>
</tr>
</tbody>
</table>

### 3.11 Pharmacy-based sexual health services

24 (77%) of the 31 PCTs commissioned some type of pharmacy-based sexual health service. The vast majority of these contracts were solely for the provision of emergency hormonal contraception (EHC). However, three PCTs (City & Hackney, Lewisham and Southwark) in addition to EHC also commissioned opportunistic chlamydia screening and treatment.

Details of the pharmacy-based services commissioned by those 24 PCTs are shown in Table 5.

**Table 5: Types of pharmacy-based sexual health services commissioned, 2007/08**

<table>
<thead>
<tr>
<th>Pharmacy-based services commissioned</th>
<th>No of PCTs (n= 24)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency hormonal contraception</td>
<td>17</td>
</tr>
<tr>
<td>Emergency hormonal contraception and condoms</td>
<td>1</td>
</tr>
</tbody>
</table>
### 3.12 National Chlamydia Screening Programme

All of the 31 PCTs commissioned local chlamydia screening services as part of the National Chlamydia Screening Programme (NCSP). Twenty-four (77%) stated that they had collaborative commissioning arrangements with other PCTs to procure and in some cases deliver the local programme and seven PCTs (23%) had unilateral programmes (Barnet, City & Hackney, Ealing, Hounslow, Lewisham, Newham and Tower Hamlets).

Some programmes sub-contracted to different providers in order to increase screening capacity. Sub-contractors included GPs, NHS acute trusts, community pharmacies and voluntary/third sector services and organisations including MSI, Brook and Terrence Higgins Trust (THT).

Remuneration contracts were reported to be in place in 18 PCTs. The types of remuneration contracts reported varied: some were based on screening kits handed out, some on tests received at the laboratory and others on treatment. Remuneration rates were reported as ranging from £1 to £20. Some remuneration contracts also included bonus payments once a certain amount of activity had been achieved.

### 3.13 Primary STI and HIV prevention

In 2007/08, thirty (97%) of the 31 PCTs commissioned local primary STI and HIV prevention programmes from a range of providers in both the NHS and voluntary/third sector organisations.

Results were difficult to interpret as many PCTs gave poor information on what the contracts provided and demonstrated poor understanding of the definitions of primary STI & HIV prevention provided by the HPA Health Promotion team. These definitions, describing the type of prevention work that may be commissioned, are listed in the commissioning questionnaire at Appendix 1. PCTs were asked to complete simple fields on the activity commissioned, the target group, the financial allocation and any change to contracts in 2008/09.

Many PCTs provided details of pan-London schemes even though these were excluded from the question. Some PCTs provided details of their HIV community nursing budgets and teenage pregnancy team budgets even though neither of these expressly had primary HIV or STI prevention remits.

For many PCTs it proved difficult to disaggregate budgets allocated to HIV and STI prevention from those for treatment and care, as many organisations were commissioned to provide services for both out of one financial allocation. A number of PCTs reported finding difficulty in accessing financial data, as some services were jointly commissioned with the local authority.
3.14 Local engagement
All 31 PCTs described formal mechanisms by which to engage with sexual health service providers.

A minority of PCTs provided examples of comprehensive user engagement, but many were less clear about their mechanisms for engaging with service users, real and potential. Two PCTs (6%) reported that they had not consulted with sexual health service users and had no current mechanisms for doing so (Bexley and Wandsworth).

3.15 Referral pathways
Twenty-nine PCTs (93%) described having some type of formal and agreed referral pathways between services. One PCT (Haringey) reported having no such pathways and one did not answer the question.

The detail provided by all 29 PCTs on their formal referral pathways between services is shown in Table 6.
Table 6: Formal referral pathways in place

<table>
<thead>
<tr>
<th>Referral pathways</th>
<th>No of PCTs with referral pathways in place (n=29)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary care and GUM</td>
<td>17</td>
</tr>
<tr>
<td>Contraception services and GUM</td>
<td>22</td>
</tr>
<tr>
<td>Community pharmacy and GUM</td>
<td>12</td>
</tr>
<tr>
<td>Voluntary sector and GUM</td>
<td>17</td>
</tr>
<tr>
<td>GUM and contraception services</td>
<td>18</td>
</tr>
<tr>
<td>Primary care and contraception services</td>
<td>19</td>
</tr>
<tr>
<td>Community pharmacy and contraception services</td>
<td>12</td>
</tr>
<tr>
<td>Voluntary sector and contraception services</td>
<td>12</td>
</tr>
<tr>
<td>NCSP and contraception services</td>
<td>20</td>
</tr>
<tr>
<td>NCSP and general practice</td>
<td>14</td>
</tr>
<tr>
<td>NCSP and community pharmacy</td>
<td>20</td>
</tr>
<tr>
<td>NCSP and GUM</td>
<td>14</td>
</tr>
<tr>
<td>Voluntary sector and NCSP</td>
<td>12</td>
</tr>
</tbody>
</table>

3.16 Clinical networks

PCTs demonstrated variable knowledge and understanding regarding their providers’ affiliation to clinical networks and the role of providers and commissioners in these.

Clinical networks in North East and North West London were generally well identified, although there was sometimes a lack of clarity regarding who were the clinical leads. The findings in South East London and South West London were similar, but the clinical lead was less commonly identified. Real confusion was evident in North Central London with some PCTs referring to an embryonic clinical network and others definite that no network existed.

Although some PCTs were clear about commissioning involvement in the clinical networks, the majority were not.

3.17 Commissioning and new investment plans for 2008/09

When asked about commissioning intentions and plans for new investment in 2008/09, the majority, 29 PCTs (94%), described investment plans, while two (6%) reported having no such plans (Bexley and Bromley).
Most commonly cited investments were:

- HIV point of care testing
- Development of enhanced pharmacy-based services for EHC, and chlamydia screening and treatment
- Development of enhanced services in general practice
- Initiatives to improve access to contraception, including LARC
- Local NCSP
4 Results - provider questionnaire

4.1 NHS GUM & CSRH services

Questionnaires were sent to the 29 GUM and 30 CSRH services commissioned in London in 2007/08. 100% of these were completed and returned. Key data relating to provider responses are summarised in Appendix 7.

4.2 Funding

In 2007/8, 14 (48%) of the 29 GUM services were funded by PbR, two (7%) by partial PbR and 13 (45%) on block contracts.

In contrast, 29 (97%) of the 30 CSRH services were funded on block contracts and one (3%) by partial PbR for its community gynaecology service.

4.3 Clinical information

4.3.1 Premises

Just over half the 29 GUM services (15, 52%) reported their premises as being fit for purpose. Among those 14 (48%) which described their premises as unfit, the main reason was lack of clinical space.

While many of the 30 CSRH services operate from multiple sites, when asked about their main premises there was a similar assessment, with 17 (57%) of the 30 services reporting the premises fit for purpose. Among the 13 (42%) which described their premises as being unfit, reasons included lack of clinical space, inadequate reception and notes storage, lack of privacy in waiting areas, lack of disability access and poor site maintenance.

4.3.2 Access

All services were asked about access, including the numbers of hours services were open to patients each week and the number of these opening hours that were provided ‘out of hours’ (defined as after 7pm on a weekday or anytime at a weekend). Services were also asked to provide details of how patients accessed their services and whether this was by appointment or by walking in.

There were significant variations in total and ‘out of hours’ access offered by GUM and CSRH services. CSRH services, on average, were open for 12.6 hours more per week than GUM services, and offered 9 extra hours of ‘out of hours’ access.

In GUM, services were open from 14 to 85 hours per week with a mean of 41.2 hours. ‘Out of hours’ access was offered by 23 (74%) of the 29 services. The total number of ‘out of hours’ services offered by each provider ranged from one to nine hours, with a mean of 2.2 hours per week.

In CSRH, services were open from 10 to 180 hours per week with a mean of 53.7 hours. ‘Out of hours’ access was offered by all 30 services. The total amount of ‘out of hours’ access ranged from one to 39 hours, with a mean of 11.2 hours per week.

When asked how patients accessed their services, 23 (79%) of the 29 GUM services reported providing mixed access with both walk-in and appointments. Four services (14%) provided walk-in access only (Caldecot Centre, Kings College Hospital NHS Trust; Department of Sexual Health, Homerton University Hospital NHS Foundation Trust; Greenway Centre, Newham University Hospital
NHS Foundation Trust; and Jeffriss Wing, St Mary’s Hospital NHS Trust). Two services (7%) offered appointments only (Archway Sexual Health Clinic and Mortimer Market Centre, Camden PCT).

In the two appointment-only GUM services the ‘did not attend’ (DNA) rate was 16% for new appointments and 19% for follow-up appointments. In the 23 mixed access GUM services where data were collected, the DNA rate for new appointments ranged from 2% to 25% with a mean of 9.5%. DNA rates for follow-up appointments were higher, with a range from 4.4% to 43% and a mean of 19%.

When asked about how patients accessed CSRH services, 28 (94%) of the 30 services reported providing mixed access and two (6%) walk-in only (Bexley and Haringey). DNA data were not routinely recorded in any of the CSRH services.

4.3.3 Activity

Activity information is summarised in Table 7.

Service providers were asked for data on the total number of people attending their services in 2007/8, the number of first attendances and the number of first attendances under the age of 25. The definitions of first attendance differ between GUM and CSRH services, with GUM services defining a first (new) attendance as someone new to the service or someone not seen in the last 6 weeks who does not have an open episode of care, while CSRH services define a first attendance as someone new to the service or someone not seen in the last year. There was considerable variation in the range of total attendances across both GUM and CSRH services, but GUM services saw on average 14% more people than CSRH services.

The proportion of under 25-year-olds seen in GUM and CSRH services was similar (37% vs 38%). The mean new to follow-up ratio in GUM services was 1:0.43 with a significant variation (from 1:0.19 at Mortimer Market Centre, Camden PCT to 1:0.96 at Tudor Centre, Hillingdon Hospital).

Services were also asked to provide information on where people accessing their services resided. These questions were generally well completed by GUM services, with 25 (86%) providing the information requested. The percentage of people attending services who resided in the commissioning PCT(s) ranged from 3.76% to 88% (lowest at the Victoria Clinic, Chelsea & Westminster Hospitals NHS Foundation Trust and highest at the Sydenham Centre and Queens Hospital, Barking, Havering and Redbridge Hospitals NHS Trust). Two services (Sexual Health Clinic, West Middlesex University Hospital NHS Trust and The Wolverton Clinic, Kingston Hospital NHS Trust) were unable to provide these data.

In contrast, only 4 CSRH services (13%) were able to provide accurate information on where people accessing their services resided (Croydon, Greenwich, Haringey and Sutton & Merton) with rates ranging from 84% to 89% of attenders residing in the commissioning PCT(s). Of the remaining 26 services, 15 (50%) were unable to provide these data, and 11 (37%) had estimated the attendance percentages. These estimates ranged from 67.5% to 95%.
Table 7: Attendance summary for GUM and CSRH services in 2007/08

<table>
<thead>
<tr>
<th>Provider attendance data</th>
<th>GUM n=29 Mean (range)</th>
<th>CSRH n=30 Mean (range)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total attendances</td>
<td>19,684 (7,425-51,528)</td>
<td>16,840 (2,298-52,614)*</td>
</tr>
<tr>
<td>First attendances</td>
<td>13,256 (3,816-32,730)</td>
<td>8,724 (1,531-25,950)</td>
</tr>
<tr>
<td>Percentage under 25 years old</td>
<td>37% (17-60%)*</td>
<td>38% (8-100%)**</td>
</tr>
<tr>
<td>New to follow-up ratio</td>
<td>1:0.43 (1:0.19-1:0.96)</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

*only 22 services provided attendance data for under 25s
** only 25 services provided attendance data for under 25s

4.3.4 Clinical services

Complete information was given by all GUM and CSRH service providers on the clinical services provided and this is shown in Table 8. It demonstrates a considerable range of clinical services offered in both GUM and CSRH services but little evidence of complete service integration, with only 10 (17%) of the 59 services describing this. Detailed information regarding the clinical services offered by each provider is contained in the summary table at Appendix 7 and the individual provider data sheets at Appendix 9.

It is of note that all 30 of the CSRH providers reported participating in their local NCSP by offering screening, and 23 (77%) also reported providing chlamydia treatment as part of their local NCSP.

Table 8: Summary of clinical services offered at GUM and CSRH services in 2007/08

<table>
<thead>
<tr>
<th>Clinical services offered by providers</th>
<th>GUM n=29</th>
<th>CSRH n=30</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>With outreach</td>
<td>No outreach</td>
</tr>
<tr>
<td>GUM Levels 1, 2 and 3 (+/- outreach) plus Level 1 family planning/contraception</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>GUM Levels 1, 2 and 3 (+/- outreach) and Levels 1 and 2 family planning/contraception</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>GUM Levels 1, 2 and 3 (+/- outreach) and Levels 1, 2 and 3 family planning/contraception</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Family planning/contraception Levels 1, 2 and 3 (+/- outreach) plus Levels 1 and 2 GUM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family planning/contraception Levels 1, 2 and 3 (+/- outreach) and Level 1 GUM</td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>Family planning/contraception Levels 1 and 2 (+/- outreach) and Level 1 GUM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4.3.5 Staffing

Services were asked to provide details of their staffs’ skills in relation to the provision of hormonal contraception, the fitting of LARC methods, the testing and treatment of STIs and specialist infections management (Level 3).

Information was provided by all 29 GUM services (100%) and by 29 (97%) of the 30 CSRH services. In 2007/08, Brent PCT tendered its CSRH service and awarded the contract from 2008 to a new provider. The contract holder in 2007/08 did not complete this section of the questionnaire as the service had already ceased to operate.

Table 9 reveals that a considerable number of staff working in GUM and CSRH services possessed skills pertaining to the delivery of both services. Indeed 24 GUM services (83%) reported having staff trained in the fitting of LARC and 22 CSRH services (76%) reported having staff trained in STI testing and treatment.

Table 9: Summary of staffing capability at GUM and CSRH services in 2007/08

<table>
<thead>
<tr>
<th>Staff capability</th>
<th>GUM n=29 (%)</th>
<th>CSRH n=30 (%)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>LARC fitting</td>
<td>24 (83%)</td>
<td>29 (100%)</td>
</tr>
<tr>
<td>Medical</td>
<td>24 (83%)</td>
<td>29 (100%)</td>
</tr>
<tr>
<td>Nursing</td>
<td>3 (10%)</td>
<td>24 (83%)</td>
</tr>
<tr>
<td>Dual GUM/FP</td>
<td>29 (100%)</td>
<td>22 (76%)</td>
</tr>
<tr>
<td>Medical</td>
<td>29 (100%)</td>
<td>22 (76%)</td>
</tr>
<tr>
<td>Nursing</td>
<td>25 (86%)</td>
<td>19 (65%)</td>
</tr>
<tr>
<td>Specialist infection management (Level 3)</td>
<td>29 (100%)</td>
<td>14 (47%)</td>
</tr>
<tr>
<td>Medical</td>
<td>29 (100%)</td>
<td>14 (47%)</td>
</tr>
<tr>
<td>Nursing</td>
<td>16 (55%)*</td>
<td>8 (27%)*</td>
</tr>
</tbody>
</table>

*5 GUM services did not provide this information for nursing staff
*Responses from 29 services

4.4 Governance

All of the 29 GUM services were consultant-led. In contrast, only 19 (64%) of CSRH services were consultant-led, 6 (19%) were associate specialist-led and the remaining 5 (17%) were led by other doctors, a clinical services manager or by the PCT, or the lead position was unfilled.

4.4.1 Clinical networks

Providers varied in their knowledge and understanding regarding affiliation to clinical networks and the role of providers and commissioners in the networks. Real confusion was evident in North Central London with some providers referring to an embryonic clinical network and others definite that no network existed.
On the whole GUM providers were clear in their understanding of the clinical networks although some providers were not able to name their network’s clinical lead. Conversely CSRH providers were much less clear about both the clinical networks and the engagement of CSRH providers within them. However, many CSRH providers did report engagement in the London CSRH Lead Clinicians Group.

4.4.2 Education and training

All services were asked to provide information about the education and training that they provided. This included medical and nursing training, and any education and training provided to other professional groups or organisations. Details for each provider are contained within the provider data sheets at Appendix 9.

All 29 GUM providers (100%) reported having education and training responsibilities, as did 29 (97%) of the CSRH services. The one CSRH provider that did not supply this information ceased to provide services in Brent PCT in 2008. Table 10 shows a summary of education and training offered by GUM and CSRH services in 2007/8.

Results demonstrate that the majority of GUM and CSRH services provide both undergraduate and postgraduate (non-specialist and specialist) medical training. However the postgraduate training offered by each service is very different, with GUM commonly providing career training for junior doctors and CSRH providing clinical skills training. Questionnaire responses showed a significant variation in provision of training defined by respondents as ‘specialist’ or ‘SpR’, with 80% more GUM than CSRH services stating that they provided this training.

Nursing training also demonstrates variation, particularly in relation to pre-registration training, with 85% more GUM services providing this. The difference may in part be explained by many GUM services being located in acute trusts. However CSRH services reported delivering 32% more post-registration nursing training than GUM services.

Education and training provided to other professional groups and organisations were reportedly delivered by similar numbers (>60%) of GUM and CSRH services.

Table 10: Summary of education and training offered by GUM and CSRH services in 2007/08

<table>
<thead>
<tr>
<th>Training offered</th>
<th>GUM n=29 (%)</th>
<th>CSRH n=30 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Undergraduate training</td>
<td>21 (72%)</td>
<td>16 (52%)</td>
</tr>
<tr>
<td>Postgraduate training:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Non-specialist</td>
<td>25 (86%)</td>
<td>22* (71%)</td>
</tr>
<tr>
<td>- Specialist (ST3 onwards)</td>
<td>15 (52%)</td>
<td>3 (10%)</td>
</tr>
<tr>
<td><strong>Nursing</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-registration training</td>
<td>20 (69%)</td>
<td>3 (10%)</td>
</tr>
<tr>
<td>Post-registration training</td>
<td>17 (59%)</td>
<td>25** (81%)</td>
</tr>
<tr>
<td>Other (professions, organisations)</td>
<td>20 (69%)</td>
<td>19 (61%)</td>
</tr>
</tbody>
</table>

* DipFSRH and letters of competence
** includes 8 LARC
4.5 Service changes in 2008/09
For 2008/09, 24 GUM services (83%) and 27 CSRH services (87%) reported planned changes to service delivery. This constituted integration of GUM and CSRH services in one area, one planned tender of services in favour of an integrated model of service delivery (Kingston) and change of provider in four CSRH services (Brent, Barking & Dagenham, Havering and Redbridge).

Reported service developments in GUM focused on:

- developing/introducing an electronic patient record (EPR)
- developing or increasing services for men who have sex with men (MSM)
- introducing HIV point of care testing
- increasing LARC training and provision.

Reported service developments in CSRH services focused on:

- developing or increasing outreach
- increasing their role in the local NCSP
- increasing LARC training and provision.

Some of the service developments in both GUM and CSRH services are reportedly being additionally funded.

4.6 Service constraints
There was consistency in the reporting of some service constraints across GUM and CSRH services, with lack of, or poor, IT being a major concern to providers of both. Commonly GUM services complained about IT functionality while the majority of CSRH services were constrained by having no IT system. Workforce issues were also highlighted in relation to both staffing levels and difficulties in recruitment. Additionally GUM services were more commonly constrained by poor premises, while CSRH services consistently reported being constrained by the absence of a contraception tariff.
5 Results - non-NHS providers

5.1 Introduction

Brook and Terrence Higgins Trust (THT) were identified in the commissioning questionnaire as the two most frequently contracted non-NHS providers of sexual health services at Levels 1 and 2 in 2007/08. Marie Stopes International (MSI) and the British Pregnancy Advisory Service (BPAS) were the principle providers of abortion and also provided some vasectomies. All of these organisations provided details of the contracts they held with PCTs in 2007/08.

Details of these service provider responses are set out in Appendix 10 (and aspects of clinical services provided by Brook and THT are also included in Appendix 7).

5.2 Brook

Brook reported that in 2007/08 it was commissioned by 13 London PCTs to deliver sexual health services. These services were delivered in a variety of settings including clinics and through outreach. Services targeted young people under 25 years of age and were delivered on a sessional basis for between two and 33 hours per week. Activity data for all these services are included in the table at Appendix 10.

Of these 13 PCTs, nine commissioned clinical services (Barking & Dagenham, Brent, Camden, Harrow, Hillingdon, Islington, Lambeth, Redbridge, Southwark). These varied between PCTs and included combinations of contraception offered at one or more of Levels 1, 2 and 3, and STI testing and treatment services at either Level 1 or Levels 1 and 2. Chlamydia screening, sometimes with treatment, was offered in seven PCTs as part of the NCSP. Detailed information regarding the clinical services provided in each of the PCTs is contained within Appendix 10.

In addition to the clinical services, Brook was commissioned by six PCTs to undertake non-clinical sexual health services, including coordination of local condom distribution in two PCTs (City & Hackney and Islington), delivery of peer education programmes or sex and relationships education in two PCTs (Kensington & Chelsea and Lambeth) and other outreach to different target groups in different settings in three PCTs (Islington, Wandsworth and Westminster).

5.3 Terrence Higgins Trust

THT reported that in 2007/08, it delivered sexual health services for young people in four of the 31 PCTs (Camden, Islington, City & Hackney and Tower Hamlets). The four services were delivered from outreach settings, targeting those under 25 years of age and were delivered on a sessional basis for between 3 and 6 hours per week. All services offered Level 1 and 2 contraception and Level 1 and 2 STI testing and treatment. Activity data and details of clinical services offered by all four services are included in Appendix 10.

THT was jointly commissioned by three PCTs (Barking & Dagenham, Redbridge and Waltham Forest) to run their full local NCSP and by a further two PCTs (Newham and Tower Hamlets) to run local NCSP outreach programmes to complement the PCT-run NCSP.

In addition THT was commissioned by three PCTs (Kensington & Chelsea, Lambeth and Southwark) to provide HIV point of care testing, and in one of these (Kensington & Chelsea) to deliver outreach to increase community engagement.
5.4 Marie Stopes International (MSI)

In 2007/08 MSI was commissioned to provide abortion services by 23 PCTs and subcontracted to do so by the commissioned provider in a 24th PCT (Tower Hamlets). Contract details provided by MSI, including the clinical services commissioned by each of the 23 PCTs, are set out in Appendix 10.

All abortion contracts included: consultation; counselling; early medical abortion to nine weeks; surgical abortion to 24 weeks with a choice of local anaesthetic, conscious sedation or general anaesthetic depending on gestation; 24-hour post-procedure care and contraception at the time of procedure - Intrauterine Contraceptive Device (IUCD), Depo Provera and oral contraceptives.

In addition, abortion contracts for eighteen PCTs included chlamydia screening as an ‘opt out’, for nine PCTs the fitting of the IUS (Mirena), and for seven PCTs the fitting of contraceptive implants (Implanon).

MSI was also commissioned by three of the 23 PCTs to provide a vasectomy service.

Clients were offered care at a choice of MSI’s four London centres located in Ealing, Brixton, Buckhurst Hill, Essex and Whitfield St, W1.

5.5 British Pregnancy Advisory Service (BPAS)

In 2007/08 BPAS was commissioned to provide abortion services by 19 PCTs and subcontracted to do so by the commissioned provider in a 20th PCT (City & Hackney). Abortion contracts with each PCT varied in relation to the clinical services commissioned and Appendix 10 summarises these.

In addition to consultation and abortion procedures, BPAS stated it was contracted to provide:

- for 7 PCTs a central booking service
- for 16 PCTs the provision of contraception including IUCDs
- for 9 PCTs the fitting of the IUS (Mirena) and contraceptive implant (Implanon) as part of the contract
- for 3 PCTs chlamydia screening as part of the contract
- for 3 PCTs vasectomy services.

Clients were offered care at one of BPAS’s eight London centres located in Harrow, Kilburn, Willesden, Finsbury Park, Streatham, Bedford Square, North Middlesex Hospital and Twickenham.
6 Discussion

This report constitutes the first pan-London sexual health service mapping. There was a 100% response rate to all questionnaires sent out, which clearly demonstrates a high level of support and engagement from both commissioners and providers of services. The high response rate, and the level of data collected, mean that the strength of this report is in the detail it affords regarding services commissioned and provided in London in 2007/08.

It is within the scope of this report to highlight key issues emerging from the service mapping. The third project report, *Sex and our city*, refers to and triangulates data in this report with findings from the pan-London sexual health needs assessment undertaken by the London Health Observatory with the Health Protection Agency, and makes a number of recommendations for London.

6.1 Emerging issues

The results highlight a number of key issues which are significant for London as a whole, as well as for individual commissioners and providers of services. These are explored in some detail below and include:

1. variable commissioning capacity
2. variable use of tools to define need and direct local sexual health service provision
3. poor use of detailed service specifications in the commissioning of services
4. wide-ranging variance in understanding of contracts, resulting in evidence of mismatches in services commissioned and services provided
5. significant financial variance in spend on services across PCTs
6. significant variation in activity and access across providers and between services
7. significant limitations in the availability of service level data
8. the growing role of non-NHS providers in service delivery
9. poor understanding of the role of clinical networks.

6.2 Commissioning capacity

Results demonstrate that there is no single consistent commissioning model for sexual health in London, either in terms of location of responsibility and leadership within the PCTs, or in terms of commissioning capacity.

There were three common locations of commissioning responsibility within the PCTs, namely commissioning, commissioning with public health, and public health alone. Nine per cent of PCTs reported a structure where responsibility for sexual health was completely different.

Only 23% of PCTs had a sexual health commissioner wholly designated to the commissioning of sexual health services. In the remaining 77% of PCTs, those responsible for sexual health commissioning varied, as did the amount of time their posts were dedicated to sexual health commissioning. Nine of the 31 commissioners reported spending 25% or less of their time on sexual health and, of these, five commissioners reported 10% or less of their posts being dedicated to sexual health.

6.3 Commissioning tools

PCTs reported inconsistent use of tools to assist and inform commissioning.

Nineteen per cent of PCTs had not completed a sexual health needs assessments in the last three years so did not have an up-to-date understanding of the baseline epidemiology or need within
their population. Of the 81% of PCTs who had undertaken a needs assessment within the last three years, there was significant variation in the focus and complexity of the assessment.

Equally, 29% of PCTs either did not have local sexual health strategies in place or had a strategy that was reported as being out of date, resulting in over a quarter of all PCTs having no single document that collated epidemiological and population-based data in order to provide a focus and steer for sexual health service commissioning and provision.

6.4 Use of service specifications
The use of detailed service specifications which provide clarity for both commissioners and providers was inconsistent.

Results demonstrate that, although overall 71% of PCTs reported using detailed service specifications, these were rarely used across all services. They were most commonly used for CSRH and GUM services but by less than 50% of PCTs. All PCTs commissioned abortion services yet only 42% reported using a detailed service specification for these.

These findings are disappointing, especially as the London Sexual Health Programme produced and has made available draft service specifications for GUM and abortion services since 2006.

6.5 Variance in understanding of contracts
Poor use of service specifications may be in part responsible for the mismatch in commissioning and service provision that was uncovered as part of this project, that is, commissioners reporting commissioning a particular service at a certain level and providers reporting delivering a different service.

Examples include:

CSRH Services

- Eight PCTs (Barking & Dagenham, Havering, Hounslow, Kingston, Lambeth, Newham, Redbridge and Richmond & Twickenham) reported commissioning CSRH services at Levels 1 and 2 only. Their providers, with the exception of Redbridge, reported delivering services at Levels 1, 2 and 3.

- One PCT (Bexley) reported commissioning services at Level 1 only. Their commissioned provider reported delivering services at Levels 1 and 2.

Abortion Services

- In 2007-8, non-NHS organisations provided the majority of NHS-funded abortions in London, yet information on services contracted from MSI and BPAS were variably reported by commissioners and in most cases did not completely correlate with contract information provided by MSI and BPAS (Appendix 10).

- When asked to describe their abortion contracts, only two PCTs reported commissioning chlamydia screening as part of these, yet MSI reported that all of the contracts it held with 23 PCTs included ‘opt out’ chlamydia screening and as did BPAS for three of its PCT contracts.

- Furthermore 11 PCTs reported commissioning LARC methods as part of their abortion contracts, yet 12 of the contracts MSI held with PCTs and 10 of the BPAS contracts included provision of the IUS (Mirena) and contraceptive implants (Implanon).
6.6 Significant financial variance in service spend across PCTs

Sexual health services account for a very small proportion of total PCT spend, on average 1% of the total PCT budget.

However there was considerable variation in spend across the PCTs in relation to the different services commissioned. The spend on services and their potential significance are explored below.

**GUM Services**

- In those PCTs which ‘hosted’ or commissioned a GUM service in 2007/08 there was a significant skew in funding towards GUM services. Until the ‘de-hosting’ of GUM services in 2008/09, PCTs that ‘hosted’ a GUM service were responsible for its complete funding. For those PCTs ‘hosting’ a large service or indeed a number of services this meant a significant financial burden. The ‘de-hosting’ of GUM services puts in place a PbR tariff with cross-charging arrangements between PCTs. The London Sexual Health Programme led work on estimating the financial implications for PCTs and putting in place risk-sharing arrangements for a transitional period. This will result in a number of PCTs significantly reducing their GUM spend. For the three PCTs who did not ‘host’ a GUM service (Bexley, Islington and Lewisham), there are significant financial implications.

- Additionally there was a complete lack of parity in spend on GUM services across those PCTs which ‘hosted’ a service. When set against the LHO population data it may be of interest to note the per capita variance in spend although it was not within the scope of this project to explore whether this results in disparity in outcomes or quality across services.

**CSRH Services**

- All PCTs commissioned CSRH services, yet spend on CSRH services showed a 35-fold variation across PCTs.

- It is of note that CSRH providers reported block contracts rarely being based on the full costs of providing the service, with most contracts usually covered staffing and drugs but not rent or upkeep of premises. This is unlike PbR tariffs which are based on covering the full costs of the service.

**Abortion Services**

- All 31 PCTs commissioned abortion services yet spend showed a seven fold variation. However it should be noted that commissioners’ understanding varied between PCTs as to what was delivered through these contracts.

**Enhanced services in general practice**

- Forty-eight per cent of PCTs did not commission enhanced services from GPs. Of the 52% of PCTs that did, the vast majority of contracts were for the fitting of LARC.

**Pharmacy-based sexual health services**

- Twenty-three per cent of PCTs did not commission pharmacy-based services. Of the 77% that did, 96% were emergency hormonal contraception (EHC) schemes.

- Only 13% of PCTs commissioning EHC pharmacy-based services utilised their contracts to include opportunistic chlamydia screening and treatment.
• No PCT spent more than 3% of their sexual health budget on pharmacy-based services.

**National Chlamydia Screening Programme**

• All 31 PCTs commissioned local programmes.

• Chlamydia screening is one of the NHS Operating Framework ‘Vital Signs’ in 2008/09. The majority of London PCTs will need to make significant progress if they are to reach the 17% screening target.

**Primary STI and HIV prevention**

• Results indicate a lack of clarity among commissioners about what constitutes primary prevention and what is being commissioned from providers.

6.7 Significant variation in activity and access across providers and between services

Although the majority of providers of both GUM and CSRH services found their premises were fit for purpose, over 40% stated that they were not. This most often related to lack of clinical or administrative space. The questionnaire did not allow assessment from the patient’s perspective but focused on constraints to service delivery.

There was significant variation in total access hours both within and between GUM and CSRH providers, with significantly greater ‘out of hours’ access offered by CSRH services.

The majority of service providers offered mixed access to patients with a combination of walk-in and appointment services. DNA rates, where collected, were high at 16% for new patients in GUM services. The lack of IT infrastructure meant only four CSRH services could provide such data.

There is considerable variation in activity levels between providers in both GUM and CSRH, although the scale is similar, with 580,446 attendances at GUM and 439,570 at CSRH services. The mean new-to-follow-up ratio for GUM at 1:0.43 is in line with the British Association for Sexual Health & HIV (BASHH) recommendation.

Providers with more comprehensive services were more likely to offer outreach, with 18 GUM and 24 CSRH providers providing outreach in addition to Level 1-3 clinic-based services.

There was very little evidence of integrated Level 3 services from either GUM or CSRH providers. In contrast, data provided on staffing indicated that 100% of GUM services had some dually trained staff, compared to 76% of CSRH services. This suggests there is under-utilised expertise in the workforce.

All GUM services were consultant-led in contrast to only 64% of CSRH services.

In excess of 80% of GUM services and 70% of CSRH services provided postgraduate medical training, but significantly more post-registration nursing training was provided in CSRH services. Similar numbers of GUM and CSRH services (>60%) reported providing education and training for other professional groups and organisations.

6.8 Significant limitations in the availability of service level data

Problems with IT played a particularly significant role as obstacles to the availability of service data. The issues raised regarding IT were different for GUM and CSRH services.

• IT capability and functionality remains a key issue for GUM services.
In CSRH services a serious lack of IT resulting from under-investment is consistently highlighted, as are inadequate data sets.

6.9 The growing role of non-NHS providers in service delivery

Although non-NHS providers did not provide services in all PCTs, they reported an increasing role in service provision.

- In 2007/08, Brook and THT delivered clinical sexual health services targeting young people in 11 of the 31 PCTs. All contracts were for sessional services.

- These clinical services were offered in the range of Levels 1-3 contraception and Levels 1 and 2 STI testing and treatment.

- In addition, Brook and THT provided chlamydia screening and HIV point of care testing in a number of PCTs, as well as other non-clinical outreach services.

- Both organisations provided governance for their own services.

- There were in excess of 27,000 attendances at these non-NHS provider services in 2007/08, a small but significant stake in service provision.

- Both Brook and THT report new and increased service contracts for 2008/09.

- MSI and BPAS were the principle providers of NHS-funded abortion in London in 2007/8.

6.10 Poor understanding of the role of clinical networks

Responses to both questionnaires show poor understanding of arrangements for clinical networks. Clinical networks are endorsed by BASHH, the British HIV Association (BHIVA) and the National Strategy for Sexual Health and HIV in terms of their role, and the provision of services through networks is a key part of national Recommended standards for sexual health services\(^2\). Yet where they exist in London there is not full engagement among services providers, and awareness of their existence, their roles, and the identity of network leads is variable among both commissioners and providers.

6.11 Limitations of the project

There are a number of limitations to this service mapping, and in particular the data collected. These are listed below.

- Although the response rate was 100%, some respondents acknowledged that some data were estimated.

- The timescale for project turnaround and delivery was rapid and this may have inhibited accurate data responses.

- This was the first use of both questionnaires as tools and whilst there was piloting, this was limited. Responses demonstrated that some questions were not well understood.

- This was a self assessment exercise with PCTs and providers responsible for submitting their own data. Where inconsistencies were picked up, verification was sought from respondents.

However, the scope of the project did not allow for verification with published PCT data or national provider data sets.

- There may have been some missed opportunities for more triangulation between the questionnaires, one example being provider contract types. These were asked for in the provider questionnaire for GUM and CSRH services but not in the PCT commissioning questionnaire.

- A decision was made to base the questionnaires on 2007/08 data because they were complete. However, GUM services have moved to ‘de-hosting’ in 2008/09 which will significantly alter financial spends for many PCTs.

- Contract information was often lacking in detail so it is not possible to be clear about what was, or what was not, included.

- The results provide a snapshot for 2007/08. Although questions were asked in both questionnaires about planned changes for 2008/09, it is not possible to map trends.

- It is acknowledged that much work has been undertaken in recent years to improve both sexual health commissioning and sexual health service provision. This service mapping exercise did not demonstrate the journeys PCTs are on in terms of changing their models of commissioning or improving the services they commission.

- This mapping takes no account of the sexual health services provided within primary care (other than brief information about commissioning of enhanced services) nor those in the private sector.

- As this was not an outcome-driven mapping exercise, it is not possible to assess what difference clinical networks have made to clinical care.
7 Conclusion

It is each PCT’s responsibility to understand the sexual health needs of its population and strive towards world class commissioning of services to meet those needs. In a competing healthcare arena where sexual health spend accounts for only 1% of PCT budgets, the variance in commissioning capacity across London is not surprising.

There are a number of important issues to emerge from this report that require urgent attention, including the implementation of fit for purpose IT systems to enable the collection of service level data, and the development and implementation of a tariff for contraceptive services.

Findings in this report may support an increased leadership role for the London Sexual Health Programme. The Programme has the capacity to support PCTs as they strive toward delivery of world class services through:
- supporting commissioning development and capacity
- the development of standard service specifications
- the development of standard contracts.

Ultimately findings in this report would endorse the potential of sexual health services to be commissioned collaboratively either in localities, networks or on a pan-London basis.
Appendix 1 - Commissioning Questionnaire

<table>
<thead>
<tr>
<th>PCT Commissioning Questionnaire</th>
<th>Sexual Health Service Mapping: Levels 1,2 &amp; 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PCT Commissioning Questionnaire Introduction</strong></td>
<td></td>
</tr>
<tr>
<td>MedFASH (Medical Foundation for AIDS &amp; Sexual Health) has been commissioned by the London Sexual Health Programme to deliver a pan-London Sexual Health Service Mapping &amp; Needs Assessment. In order to do this MedFASH is being supported by a wide range of stakeholders who are members of a Project Advisory Group.</td>
<td></td>
</tr>
<tr>
<td>The London Public Health Observatory, working with the Health Protection Agency, have been commissioned by MedFASH to deliver the data driven Needs Assessment.</td>
<td></td>
</tr>
<tr>
<td>Data for the service mapping is being collected in two parts,</td>
<td></td>
</tr>
<tr>
<td>• Firstly via this Commissioning Questionnaire which each of the 31 London PCTs are asked to complete by Friday 23 May 2008.</td>
<td></td>
</tr>
<tr>
<td>• Secondly, via a separate questionnaire targeted at the Level 2/3 sexual health service providers identified in each of the returned PCT Commissioning Questionnaires.</td>
<td></td>
</tr>
<tr>
<td>It is essential therefore that PCTs return a completed Commissioning questionnaire in order for MedFASH to contact their providers.</td>
<td></td>
</tr>
<tr>
<td>The questionnaire has been developed with the support of Sexual Health Commissioners and has been piloted in three London PCTs. It is for each PCT to decide who is most appropriate within their organisation to complete this Commissioning questionnaire; it may be necessary for a number of people to provide relevant information.</td>
<td></td>
</tr>
<tr>
<td>If you have any general questions relating to the project please contact Claire Tyler, Project Lead, <a href="mailto:claire@wensumconsulting.com">claire@wensumconsulting.com</a></td>
<td></td>
</tr>
<tr>
<td>If you have any questions about filling in this questionnaire please contact Magnus Nelson, Project Support, <a href="mailto:mnelson@medfash.bma.org.uk">mnelson@medfash.bma.org.uk</a></td>
<td></td>
</tr>
<tr>
<td>Please complete this form electronically, and return by email as an attachment to <a href="mailto:mnelson@medfash.bma.org.uk">mnelson@medfash.bma.org.uk</a> by Friday 23 May 2008.</td>
<td></td>
</tr>
</tbody>
</table>

**General Information**

Please fill in responses in the white spaces below. Use TAB or ‘→’ key to move to the next answer box. Use ‘←’ key to move back to the previous.

<table>
<thead>
<tr>
<th>1</th>
<th>Name of PCT:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Contact name</td>
</tr>
<tr>
<td></td>
<td>(of person responsible for completing this form):</td>
</tr>
<tr>
<td></td>
<td>Position:</td>
</tr>
<tr>
<td></td>
<td>Address:</td>
</tr>
<tr>
<td></td>
<td>Tel:</td>
</tr>
<tr>
<td></td>
<td>Email:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2</th>
<th>Where does sexual health sit within the PCT structure?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Please mark ‘x’ in relevant box below</td>
</tr>
<tr>
<td></td>
<td>Commissioning:</td>
</tr>
<tr>
<td></td>
<td>Public health:</td>
</tr>
<tr>
<td></td>
<td>Finance:</td>
</tr>
<tr>
<td></td>
<td>Other:</td>
</tr>
<tr>
<td></td>
<td>If other, please specify below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3</th>
<th>Who is the responsible PCT Director?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Please specify name and job title:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4</th>
<th>Name, job title and contact details of person(s) responsible for leading sexual health commissioning:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Please state what % of their post is devoted to sexual health commissioning (not including HIV specialised treatment and care) and list any other responsibilities they have including any joint commissioning responsibilities:</td>
</tr>
<tr>
<td>b</td>
<td>Please use this section to list any responsibilities they have for joint commissioning arrangements such as being the lead/host or coordinating commissioner for collaboratively commissioned services across more than one PCT (e.g. Chlamydia screening, contraception, voluntary sector services):</td>
</tr>
</tbody>
</table>
## PCT Commissioning Strategy

**Has the PCT undertaken a health needs assessment that was either focussed on sexual health or included sexual health?**

[ ] YES  [ ] NO

If Yes, answer questions 6 & 7 and then proceed to question 9.
If No, go to question 8.

### 6

a. If a specific sexual health needs assessment has been undertaken, what type was it?

- Comprehensive: 
- Rapid: 
- Service targeted: 
- Other: 

b. Please use this space to provide further information:

c. When was the sexual health needs assessment done?

- By whom?

### 7

Is the PCT sexual health needs assessment used as a basis for commissioning?

[ ] YES  [ ] NO

If Yes, please answer section ‘a’ below.
If No, please answer section ‘b’ below.

Please note that the white text boxes below will allow you to enter as much data as you like. When you exit the white box, some of your text may be hidden. To view or edit it again, click back into the box.

a. Please identify how:

b. Do you have plans to use it for commissioning?

If yes please describe how, if no, please tell us why not:

### 8

If you have not undertaken a health needs assessment (or another assessment that included sexual health), are you planning to do one?

[ ] YES  [ ] NO

If yes, when will this be done, by whom and what type of needs assessment will it be?

### 9

Do you have a PCT Sexual Health Strategy?

[ ] YES  [ ] NO

If No, please proceed to question 11
If Yes, please answer the rest of this question & question 10

Please note that the white text boxes below will allow you to enter as much data as you like. When you exit the white box, some of your text may be hidden. To view or edit it again, click back into the box.

a. When was the strategy published?

b. Did sexual health needs assessment inform its development?

[ ] YES  [ ] NO

c. Were the Local Authority involved in its development?

[ ] YES  [ ] NO

d. Please list other key stakeholders involved in the process:

- 
- 
- 
- 
- 

e. When is the strategy due for revision?

- 

f. Please use this space if you wish to provide further information in relation to the strategy:

### 10

Is the PCT Sexual Health Strategy used as a basis for commissioning?

[ ] YES  [ ] NO

If Yes, please answer section ‘a’ below.
If No, please answer section ‘b’ below.

Please note that the white text boxes below will allow you to enter as much data as you like. When you exit the white box, some of your text may be hidden. To view or edit it again, click back into the box.

a. Please identify how:

b. Do you have plans to use it for commissioning?

If yes please describe how, if no, please tell us why not:
### Sexual Health Services commissioned in 2007/08

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 What is the PCT annual spend on commissioned sexual health services (excluding specialised HIV treatment and care)? Please be aware that this should include spending in all areas identified in questions below.</td>
<td>£</td>
</tr>
<tr>
<td>12 What is the total sexual health service spend as a % of the total PCT budget?</td>
<td>%</td>
</tr>
<tr>
<td>13 Do you commission against detailed service specifications?</td>
<td>YES</td>
</tr>
<tr>
<td>If Yes, please answer the rest of this question and then proceed to question 14. If No, please proceed to question 14.</td>
<td></td>
</tr>
<tr>
<td>a Where did these specifications come from and when were they approved?</td>
<td></td>
</tr>
<tr>
<td>b Please list the services for which you use detailed service specifications:</td>
<td></td>
</tr>
</tbody>
</table>

The following questions (14-21) relate to the specific sexual health services you commission. It is important that you fully respond to each question as some service providers will be contacted and asked to complete the provider questionnaire.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Please specify the total PCT annual spend in 2007/08 for all GUM services (including outreach commissioned from GUM providers) :</td>
<td>£</td>
</tr>
<tr>
<td>i The names, addresses and postcodes of provider(s) you commission to deliver GUM services</td>
<td></td>
</tr>
<tr>
<td>ii Their indicative budget</td>
<td></td>
</tr>
<tr>
<td>iii Using Appendix A, please identify the levels of service each provider is commissioned to deliver</td>
<td></td>
</tr>
<tr>
<td>iv Any planned changes to this contract in 2008/09 (excluding de-hosting)</td>
<td></td>
</tr>
<tr>
<td>Provider 1 name and address and postcode:</td>
<td>Budget</td>
</tr>
<tr>
<td>Provider 2 name and address and postcode:</td>
<td>Budget</td>
</tr>
<tr>
<td>Please describe any planned changes to this contract in 2008/09 (excluding dehosting):</td>
<td></td>
</tr>
<tr>
<td>Provider 2 name and address and postcode:</td>
<td></td>
</tr>
<tr>
<td>Please describe any planned changes to this contract in 2008/09 (excluding dehosting):</td>
<td></td>
</tr>
</tbody>
</table>

Please mark 'x' in relevant boxes below

Appendix A lists definitions for Level 1, 2 & 3 sexual health services

LEVEL 1 | LEVEL 2 | LEVEL 3
---|---|---

If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer. Please clearly indicate the number of the question you are answering.
Please specify the total PCT annual spend in 2007/08 for community contraceptive / family planning services (not GPs).

<table>
<thead>
<tr>
<th>a i</th>
<th>Are these services commissioned to solely deliver community contraceptive / family planning services?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES</td>
</tr>
</tbody>
</table>

If Yes, please proceed to section b of this question. If No, please answer section ii below, and then complete the rest of the question.

| a ii | Are these services commissioned to deliver any STI screening and treatment? |
|      | YES | NO |

If No, please proceed to section b of this question. If Yes, please also proceed to section b but remember to include details of these services with your answers.

<table>
<thead>
<tr>
<th>b</th>
<th>Please list in the boxes provided:</th>
</tr>
</thead>
<tbody>
<tr>
<td>i</td>
<td>The names and addresses, including postcodes, of provider(s) you commission to deliver community contraceptive / family planning services</td>
</tr>
<tr>
<td>ii</td>
<td>Their indicative budget</td>
</tr>
<tr>
<td>iii</td>
<td>Using Appendix A, please identify the levels of service each provider is commissioned to deliver for both community contraception / family planning, and if appropriate, STI screening and treatment</td>
</tr>
<tr>
<td>iv</td>
<td>Any planned changes to this contract in 2008/09</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provider 1 name and address and postcode:</th>
<th>Budget £</th>
<th>LEVEL 1</th>
<th>LEVEL 2</th>
<th>LEVEL 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Appendix A lists definitions for Level 1, 2 & 3 sexual health services.

Use the line below to indicate the level(s) for Contraceptive / family planning services provided.

Use the line below to indicate the level(s) for STI screening and treatment (if appropriate).

Please describe any planned changes to this contract in 2008/09:

<table>
<thead>
<tr>
<th>Provider 2 name and address and postcode:</th>
<th>Budget £</th>
<th>LEVEL 1</th>
<th>LEVEL 2</th>
<th>LEVEL 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please describe any planned changes to this contract in 2008/09:

If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer. Please clearly indicate the number of the question you are answering.
Please specify the total PCT annual spend in 2007/08 for any other commissioned sexual health services (e.g. young people’s services, Brook).

Please do NOT use this section to identify HIV or STI Prevention contracts. We will ask you about these in question 21.

a. Please list in the boxes provided:

i. The names, addresses and postcodes of provider(s) you commission to deliver these services

ii. Their indicative budget

iii. Using Appendix A, please identify the levels of service each provider is commissioned to deliver

iv. Any planned changes to this contract in 2008/09

<table>
<thead>
<tr>
<th>Provider 1 name and address and postcode:</th>
<th>Budget £</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>LEVEL 1</td>
</tr>
<tr>
<td></td>
<td>Please mark ‘x’ in relevant boxes below</td>
</tr>
<tr>
<td></td>
<td>Use the line below to indicate the level(s) for Contraceptive / family planning services provided</td>
</tr>
<tr>
<td></td>
<td>Use the line below to indicate the level(s) for STI screening and treatment (if appropriate)</td>
</tr>
</tbody>
</table>

Please describe any planned changes to this contract in 2008/09:

<table>
<thead>
<tr>
<th>Provider 2 name and address and postcode:</th>
<th>Budget £</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>LEVEL 1</td>
</tr>
<tr>
<td></td>
<td>Please mark ‘x’ in relevant boxes below</td>
</tr>
<tr>
<td></td>
<td>Use the line below to indicate the level(s) for Contraceptive / family planning services provided</td>
</tr>
<tr>
<td></td>
<td>Use the line below to indicate the level(s) for STI screening and treatment (if appropriate)</td>
</tr>
</tbody>
</table>

Please describe any planned changes to this contract in 2008/09:

If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer. Please clearly indicate the number of the question you are answering.
17 Please specify the total PCT annual spend in 2007/08 for abortion services: £

Please list in the boxes provided:

i The names and addresses, including postcodes, of provider(s) you commission abortion services from

<table>
<thead>
<tr>
<th>Provider 1 name and address and postcode:</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
</tr>
</tbody>
</table>

Please note that the white text boxes below will allow you to enter as much data as you like. When you exit the white box, some of your text may be hidden. To view or edit it again, click back into the box.

ii Their indicative budget

iii Of the total number of abortions funded by the PCT, please indicate the % each commissioned provider performs

iv Any planned changes to this contract in 2008/09

Provider 2 name and address and postcode:

Please describe the contract with the above provider, including:

1) Methods of TOP available with gestation (weeks)

2) Type of contract, with reference to payment

- Payment by Results PbR
- indicative volume (numbers of procedures)
- indicative costs (fixed budget)
- capped by cost
- capped by volume
- other (please describe)

Please describe any planned changes to this contract in 2008/09:

If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer. Please clearly indicate the number of the question you are answering.
18. Please specify the total PCT annual spend in 2007/08 for Chlamydia screening delivered under the National Chlamydia Screening Programme (NCSP): £

**This should include the costs of the programme, laboratory costs, treatment costs, training, any incentives offered and any other costs attributed to the**

**a. How is Chlamydia screening commissioned?** Please describe whether a single contract with a Chlamydia screening office, contracts with multiple providers or collaborative commissioning arrangements between PCTs (please specify):

**b. Please describe who you commission to provide the following:**

1) NCSP screens
2) Treatment and management of patients and partners

**c. Please provide a breakdown of the total PCT annual spend in 2007/08 for Chlamydia screening by providers:**

**d. Please include details and specifications of incentives / remunerations agreed for Chlamydia screening and management (with primary care providers e.g. GPs, pharmacies):**

**e. Please describe any planned changes to contract(s) in 2008/09:**

19. Please specify the total PCT annual spend in 2007/08 for sexual health services provided by GPs outside of the GMS contract:

**a. How are these funded?**

<table>
<thead>
<tr>
<th>LES</th>
<th>PMS</th>
<th>NES</th>
</tr>
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<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Other</th>
<th>GPWSI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If other, please specify below:

**b. Please list in the boxes provided:**

i. Details of the contract(s) including what it is for, the number of GP practices involved (including practice postcodes) and whether the contracts are capped by either cost (money) or volume (activity)

ii. The overall contract's indicative budget

iii. Using Appendix A, please identify the levels of service each contract is commissioned to deliver

iv. Any planned changes to this contract in 2008/09

**Contract 1. Type (e.g. LES, PMS), details of contract (as above) and provider(s), including postcode(s):**

<table>
<thead>
<tr>
<th>Budget £</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Please mark ‘x’ in relevant boxes below

**LEVEL 1**

**LEVEL 2**

**LEVEL 3**

Please describe any planned changes to this contract in 2008/09:

**Contract 2. Type (e.g. LES, PMS), details of contract (as above) and provider(s), including postcode(s):**

<table>
<thead>
<tr>
<th>Budget £</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Please mark ‘x’ in relevant boxes below

**LEVEL 1**

**LEVEL 2**

**LEVEL 3**

Please describe any planned changes to this contract in 2008/09:

**If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer. Please clearly indicate the number of the question you are answering.**
20  Do you commission any pharmacy based services to provide contraception including emergency hormonal contraception and / or sexual health screening or treatment?

If Yes, please answer the rest of this question. If No, please proceed to question 21.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

a i  What was the total annual PCT spend in 2007/08 for these services? £

b  Please list in the boxes provided:

   i  Details of the contract to provide pharmacy based services including what it is for, the number of pharmacies involved (including pharmacy postcodes) and whether the contracts are capped by either cost (money) or volume (activity)

   ii  The overall contract's indicative budget

   iii  Using Appendix A, please identify the levels of service each is commissioned to deliver

   iv  Any planned changes to this contract in 2008/09

If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer.

Please clearly indicate the number of the question you are answering.

21  Please specify the total PCT annual spend in 2007/08 for locally-commissioned HIV and primary STI prevention (including voluntary and community provision)

Please do not include spend on pan-London commissioned services, which would include the London HIV Prevention Programme and pan-London services delivered by Positive Women, and collaboratively commissioned post-acute HIV services from the Mildmay Mission Hospital.

Please indicate below and to the right details of the activity(ies) commissioned in 2007/08: (service name, indicative budget, target group and activities commissioned, planned changes in 2008/09)

<table>
<thead>
<tr>
<th>£</th>
<th>Target group</th>
<th>Activities Commissioned</th>
</tr>
</thead>
</table>

Appendix A lists definitions for Level 1, 2 & 3 sexual health services

Appendix B lists examples of the type of activities that can be commissioned

If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer.

Please clearly indicate the number of the question you are answering.
21 Please specify the total PCT annual spend in 2007/08 for locally-commissioned HIV and primary STI prevention (including voluntary and community provision) £

Please do not include spend on pan-London commissioned services, which would include the London HIV Prevention Programme and pan-London services delivered by Positive Women, and collaboratively commissioned post-acute HIV services from the Mildmay Mission Hospital.

Please indicate below and to the right details of the activity(ies) commissioned in 2007/08:

<table>
<thead>
<tr>
<th>Provider 1 Service name</th>
<th>£</th>
<th>Target group</th>
<th>Activities Commissioned</th>
</tr>
</thead>
</table>

Please describe any planned changes to this contract in 2008/09:

<table>
<thead>
<tr>
<th>Provider 2 Service name</th>
<th>£</th>
<th>Target group</th>
<th>Activities Commissioned</th>
</tr>
</thead>
</table>

Please describe any planned changes to this contract in 2008/09:

If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer. Please clearly indicate the number of the question you are answering.

Appendix B lists examples of the type of activities that can be commissioned.

22 As a PCT how do you engage with your providers? Please list provider forums / strategy groups, their membership and frequency of meetings.

23 As a PCT how do you engage with service users? Please list user groups / forums and describe how service user feedback informs the development and provision of services.

24 Are referral pathways defined and agreed between the services identified below? (Please only use the N/A option if you do not currently commission these services).

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Primary care and GUM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Contraceptive Services and GUM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Community pharmacy and GUM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Voluntary sector and GUM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e GUM and Contraceptive services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Primary care and Contraceptive services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Community pharmacy and Contraceptive services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Voluntary sector and Contraceptive services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i NCSP and Contraceptive services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j NCSP and General Practice</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>k NCSP and Pharmacy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>l NCSP and GUM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>m Voluntary sector and NCSP</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

25 Are your providers members of a Clinical Network? YES NO

If Yes, please answer the rest of this question

If No, please proceed to Question 26

a If yes, please identify which one and provide the name of the clinical lead AND the network manager:

b Did the PCT fund all or fund part of the clinical network in 2007/08? Please provide details of any local arrangement:

c Is the Clinical Network provider led?

d Is there commissioner involvement in the Clinical Network?

YES NO YES NO
In questions 14-21 we asked you about sexual health services you commissioned in 2007/08 and about any changes to EXISTING individual contracts in 2008/09.

Please use this section to tell us about any NEW investment plans for 2008/09.

26 Please list in the boxes provided any new investment in service delivery for 2008/09 with information that includes:

Please note: we are not asking for details of any extension or change to existing commissioned services in 2007/08 that you have identified earlier in the questionnaire.

i  Aim of the service
ii  Provider (e.g. contraceptive service, GP, pharmacy)
iii  Target users / priority groups
iv  Location of the service
v  Value of planned investment
vi  Using Appendix A, please identify the levels of service the provider will be commissioned to deliver

<table>
<thead>
<tr>
<th>Investment 1:</th>
<th>Value of planned investment - £</th>
<th>LEVEL 1</th>
<th>LEVEL 2</th>
<th>LEVEL 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investment 2:</td>
<td>Value of planned investment - £</td>
<td>LEVEL 1</td>
<td>LEVEL 2</td>
<td>LEVEL 3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you need further space to complete this question, please go to the end of the questionnaire (question 28 Additional Information) and use the free text box to finish your answer. Please clearly indicate the number of the question you are answering.

27 a  In 2008/09 do you have specific plans to shift EXISTING activity out of an acute setting?

b  In 2008/09 do you have specific plans to commission ADDITIONAL OR NEW activity in a non acute setting?

If Yes, please answer the rest of the question
If No, please proceed to question 28

If you have answered yes to either part a or b above, please provide the following information:

1) which services this relates to (eg GUM)
2) how this will be done
3) the value of the activity

It will be helpful to us if you can cross-reference your answers here to earlier answers in the relevant sections above.

28 Additional information

Please use this section to:

i  Complete earlier questions (ensuring you clearly indicate the question number with the information you provide)

ii  Raise any other issues not covered in this questionnaire

Please note that the white text boxes will allow you to enter as much data as you like. When you exit the white box, some of your text may be hidden. To view or edit it again, click back into the box.

Δ To enter a new line / start new paragraph press ALT+RETURN
### Appendix A - National Strategy definitions for Levels 1, 2 and 3 Sexual Health services

**Level 1**
- Sexual history taking, risk assessment and sign posting
- Asymptomatic STI testing and treatment (men and women)
- ‘Simple’ partner notification
- HIV testing (including pre-test discussions and giving results)
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for Termination of Pregnancy
- Provision of hormonal emergency contraception
- Contraception information and services
- Condom distribution
- Health promotion
- Hormonal contraception / depot
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

**Level 2**
- Level 1 plus:
  - IUD insertion and removal (including emergency IUD)
  - Contraception implant insertion and removal
  - Symptomatic STI testing and treatment (men and women)
  - Counselling and referral for vasectomy

**Level 3**
- Level 1 and 2 plus:
  - Specialist Level: responsible for supporting provider quality, teaching and training and clinical governance (e.g. support for GPs and pharmacists and via networks)
  - STI outreach
  - Contraception outreach
  - Specialist services for ‘at risk groups’ e.g. young people, gay men, CSW
  - Specialist infection management
  - Genital dermatoses
  - Co-ordination of partner notification
  - Highly specialised contraception
  - Difficult IUD insertion and removal
  - Difficult implant removal
  - Specialist HIV treatment and care
  - Psychosexual / Erectile dysfunction services
  - Provision and follow-up of post-exposure prophylaxis for HIV
  - Sexual Assault services

### Appendix B - Definitions of Sexual Health Promotion

Any activity which proactively and positively supports the sexual and emotional health and well-being of individuals, groups, communities and the wider public and reduces the risk of STI / HIV transmission (DH 2003).

Examples may include:
- media campaigns
- community development approaches
- sex and relationship education
- group work
- one to one work
- condom distribution
- publicising local sexual health services
- detached and street work
- peer education
- outreach work
- targeted work with particularly vulnerable groups
- production and dissemination of materials (posters, leaflets)
- promoting self care
### Provider questionnaire

#### General Information

Please fill in responses in the white spaces below. Use TAB or '→' key to move to the next answer box. Use '←' key to move back to the previous box.

<table>
<thead>
<tr>
<th>1</th>
<th>Name of Service</th>
<th>(of person responsible for completing this form):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Position:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Contact address:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tel:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>email:</td>
<td></td>
</tr>
</tbody>
</table>

| 2 | Name and address of host organisation if appropriate (e.g. NHS Trust, Voluntary sector provider etc): |

<table>
<thead>
<tr>
<th>3</th>
<th>Name of Clinical Lead for the service:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Job title:</td>
</tr>
<tr>
<td></td>
<td>Contact address:</td>
</tr>
<tr>
<td></td>
<td>Tel:</td>
</tr>
<tr>
<td></td>
<td>email:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4</th>
<th>Which PCT(s) commission / fund you to provide sexual health services?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If you are only commissioned by one PCT, please proceed to question 5.</td>
</tr>
<tr>
<td></td>
<td>If more than one PCT commissions your service, please answer the rest of this question.</td>
</tr>
</tbody>
</table>

|   | If more than one PCT commissions your service, please indicate which PCT is the lead / primary commissioner: |

<table>
<thead>
<tr>
<th>5</th>
<th>Please indicate the funding arrangements for your service with the lead / primary PCT in 2007/08:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cost &amp; Volume (block contract)</td>
</tr>
<tr>
<td>a</td>
<td>If one PCT commissions your service, please only answer part b below, and then proceed to question 6.</td>
</tr>
<tr>
<td>b</td>
<td>Please describe any changes to the funding arrangements for your service in 2008/09:</td>
</tr>
<tr>
<td>c</td>
<td>Are service level agreements relating to activity in place for your service in 2008/09:</td>
</tr>
<tr>
<td></td>
<td>If yes, please describe:</td>
</tr>
</tbody>
</table>

---

**Appendix 2**

**Provider questionnaire**

**Sexual Health Service Provider Questionnaire**

**Service Mapping: Levels 2 & 3**

---

**Provider Questionnaire Introduction**

MedFASH (Medical Foundation for AIDS & Sexual Health) has been commissioned by the London Sexual Health Programme to deliver a pan-London Sexual Health Service Mapping & Needs Assessment. In order to do this MedFASH is being supported by a wide range of stakeholders who are members of a Project Advisory Group.

The London Public Health Observatory, working with the Health Protection Agency, have been commissioned by MedFASH to deliver the data driven Needs Assessment.

Data for the service mapping is being collected in two parts.

- Firstly via a Commissioning questionnaire which each of the 31 London PCTs were asked to complete by Friday 23 May 2008.
- Secondly, via this questionnaire targeted at the Level 2/3 sexual health service providers identified in each of the returned PCT Commissioning questionnaires.

This questionnaire has been developed with the support of Sexual Health providers and has been piloted in both GUM and Community Contraceptive Services. It is for each provider to decide who is most appropriate within their service to complete this Provider questionnaire; it may be necessary for a number of people to provide relevant information.

Please note that the questionnaire concerns general sexual health services NOT specialist HIV treatment and care services.

---

If you have any general questions relating to the project please contact Claire Tyler, Project Lead, claire@wensumconsulting.com

If you have any questions about filling in this questionnaire please contact Magnus Nelson, Project Support, mnelson@medfash.bma.org.uk

Please complete this form electronically, and return by email as an attachment to mnelson@medfash.bma.org.uk by Friday 13 June 2008.
### Clinical Premises

Are the main premises from which you deliver services fit for purpose?  
If Yes, please proceed to question 7  
If No, please answer the rest of this question  
If not, please highlight the three main constraints:

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Clinical Services

Which of the sexual health services specified below do you provide?

**Level 1**
- Sexual history taking, risk assessment and sign posting
- Asymptomatic STI testing and treatment (men and women)
- ‘Simple’ partner notification
- HIV testing (including pre-test discussions and giving results)
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for Termination of Pregnancy
- Provision of hormonal emergency contraception
- Contraception information
- Condom distribution
- Health promotion
- Hormonal contraception / depo
- Cervical screening and referral
- Screening and vaccination for Hepatitis B
- Chlamydia screening for men and women under 25 years as part of the National Chlamydia Screening Programme (NCSP)

**Level 2**
- Level 1 plus:
  - IUD insertion and removal (including emergency IUD)
  - Contraception implant insertion and removal
  - Symptomatic STI testing and treatment (men and women)
  - Counselling and referral for vasectomy

**Level 3**
- Level 1 and 2 plus:
  - Specialist Level: responsible for supporting provider quality, teaching and training and clinical governance (e.g. support for GPs / pharmacists and via networks)
  - STI outreach
  - Contraception outreach
  - Specialist services for ‘at risk groups’ e.g. young people, gay men, CSW
  - Specialist infection management
  - Genital dermatoses
  - Co-ordination of partner notification
  - Highly specialised contraception
  - Difficult IUD insertion and removal
  - Difficult implant removal
  - Specialist HIV treatment and care
  - Psychosexual / Erectile dysfunction services
  - Provision and follow-up of post-exposure prophylaxis for HIV
  - Sexual Assault services

Please list any other sexual health services you provide:

**Please describe below:**
8. If in Question 7 you identified that your service provided outreach, please describe the following:

   a. What is provided and the frequency that this occurs (e.g. weekly, monthly etc)? Please also describe whether this is jointly-provided with another service / organisation, and if so what their role is.

   b. The premises used (e.g. GP surgery, youth club, community centre):

   c. Where the outreach is located (address and postcode of premises):

9. Do you have any staff who are shared / jointly appointed between yourself and another provider of sexual health services?

   YES  NO

   If Yes, please answer the rest of this question
   If No, please proceed to question 10

   If yes, please describe what these posts are for and what the contractual arrangements are:

10. What proportion of medical AND nursing staff are trained to provide contraception?

    | Medical | Nursing |
    |---------|---------|
    | %       | %       |

    Of these, what % are trained to administer / fit Long Acting Reversible Contraceptives (LARCs)?

    | Medical | Nursing |
    |---------|---------|
    | %       | %       |

    If you are GU service, please describe the contraceptive service you provide, including any restrictions or target groups:

11. What proportion of medical AND nursing staff are trained to provide testing and / or treatment of sexually transmitted infections (not including patients managed under the NCSP)?

    | Testing | Treatment |
    |---------|-----------|
    | Medical | %         |
    | Nursing | %         |

    Of these, what percentage are trained in specialist infections management (level 3)?

    | Medical | Nursing |
    |---------|---------|
    | %       | %       |

12. Do you provide Chlamydia screening as part of the NCSP?

    YES  NO

    If yes, please answer the rest of this question
    If No, please proceed to question 13

    What proportion of clinical staff are trained to provide screening?

    | %

    Do you provide Chlamydia treatment as part of the NCSP?

    YES  NO

    If yes, please answer the rest of this question
    If No, please proceed to question 13

    What proportion of clinical staff are trained to provide treatment?

    | %

Access

Please fill in responses in the white spaces below. Use TAB or ‘→’ key to move to the next answer box. Use ‘←’ key to move back to the previous box.

13. How many hours per week is your service open to patients?

    Of these, how many are after 7.00pm (Monday-Friday) and / or at the weekend?

14. How do you advertise your services? (e.g. website, leaflets, NHS Direct)

15. Of the patients attending your service in 2007/08, please provide a % estimate of how they accessed the service based on the referral pathways specified below:

    self-referral %
    referral from primary care %
    referral from secondary care %
    referral from voluntary / third sector agency %
    other %

    If you've put in a % figure for 'Other', please use this text box to identify these pathways:
What type of access does your service offer?

<table>
<thead>
<tr>
<th></th>
<th>Walk in</th>
<th>Appointment</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

If you offer both walk-in and appointment services please describe the mix (i.e. 40% appointment, 60% walk-in):

If you offer a walk-in service, are patient numbers capped?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

If Yes, please answer the rest of this question
If No, please proceed to question 17

If Yes, please describe:

Does your service ever have to close to patients (turn patients away) due to pressures of numbers attending?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

If Yes, please answer the rest of this question
If No, please proceed to question 18

If yes, please describe the frequency:

Do you collect data on number of patients turned away?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

If yes, how many patients were turned away in 2007/08?

<p>| |</p>
<table>
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</table>

Of these, how many were subsequently seen in clinic?

<p>| |</p>
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Please describe how the decision is made to close a session:

Please describe your service's process for seeing emergency patients:

Activity

<p>| |</p>
<table>
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</table>

How many attendances to the service were there in 2007/08?

<p>| |</p>
<table>
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</table>

Of these, how many were for new / first attendances?

<p>| |</p>
<table>
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<th></th>
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</thead>
</table>

What % of new attendances were for people under 25 years old?

<p>| |</p>
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<th></th>
</tr>
</thead>
</table>

If you are GU provider, what was your new to follow-up ratio in 2007/08?

<p>| |</p>
<table>
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</thead>
</table>

What was your DNA rate for:

<p>| |</p>
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</table>

new appointments in 2007/08 (as a %)

<p>| |</p>
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</table>

follow-up appointments in 2007/08 (as a %)

<p>| |</p>
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</table>

What % of patients attending the service in 2007/08 were resident in the commissioning PCT? If more than one PCT commissions you to provide services, please provide the name of the PCT and a breakdown of the % of their patients attending the service in 2007/08. If you are a contraceptive / family planning provider, you will only have data for first attendances. If you are able to, please provide this.

<table>
<thead>
<tr>
<th>name of commissioning PCT</th>
<th>% of their patients attending service in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>name of commissioning PCT</th>
<th>% of their patients attending service in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Listed below are the 31 London PCTs. Please list against each the % of residents from that PCT who attended your service in 2007/08. The final box allows you to indicate the % of patients who attended from outside London. If you are a contraceptive / family planning provider, you will only have data for first attendances. If you are able to, please provide this:

<table>
<thead>
<tr>
<th>PCT</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking and Dagenham PCT</td>
<td></td>
</tr>
<tr>
<td>Barnet PCT</td>
<td></td>
</tr>
<tr>
<td>Bexley Care Trust</td>
<td></td>
</tr>
<tr>
<td>Brent Teaching PCT</td>
<td></td>
</tr>
<tr>
<td>Bromley PCT</td>
<td></td>
</tr>
<tr>
<td>Camden PCT</td>
<td></td>
</tr>
<tr>
<td>City and Hackney Teaching PCT</td>
<td></td>
</tr>
<tr>
<td>Croydon PCT</td>
<td></td>
</tr>
<tr>
<td>Ealing PCT</td>
<td></td>
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<tr>
<td>Enfield PCT</td>
<td></td>
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<tr>
<td>Greenwich PCT</td>
<td></td>
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<tr>
<td>Hammersmith and Fulham PCT</td>
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<tr>
<td>Haringey PCT</td>
<td></td>
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<tr>
<td>Harrow PCT</td>
<td></td>
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<tr>
<td>Havering PCT</td>
<td></td>
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<tr>
<td>Hillingdon PCT</td>
<td></td>
</tr>
<tr>
<td>Hounslow PCT</td>
<td></td>
</tr>
<tr>
<td>Islington PCT</td>
<td></td>
</tr>
<tr>
<td>Kensington &amp; Chelsea PCT</td>
<td></td>
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<tr>
<td>Kingston PCT</td>
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<tr>
<td>Lambeth PCT</td>
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<tr>
<td>Lewisham PCT</td>
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<tr>
<td>Newham PCT</td>
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</tr>
<tr>
<td>Redbridge PCT</td>
<td></td>
</tr>
<tr>
<td>Richmond &amp; Twickenham PCT</td>
<td></td>
</tr>
<tr>
<td>Southwark PCT</td>
<td></td>
</tr>
<tr>
<td>Sutton &amp; Merton Primary Care Trust</td>
<td></td>
</tr>
<tr>
<td>Tower Hamlets PCT</td>
<td></td>
</tr>
<tr>
<td>Waltham Forest PCT</td>
<td></td>
</tr>
<tr>
<td>Wandsworth Teaching PCT</td>
<td></td>
</tr>
<tr>
<td>Westminster PCT</td>
<td></td>
</tr>
</tbody>
</table>

% of patients attending from outside London %

---

**Staffing**

Please fill in responses in the white spaces below. Use TAB or "→" key to move to the next answer box. Use "←" key to move back to the previous box.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>23</td>
<td>Is your service led by either a consultant or associate specialist?</td>
</tr>
<tr>
<td></td>
<td>If Yes, please proceed to question 24. If No, please answer the rest of this question.</td>
</tr>
<tr>
<td></td>
<td>If no, please indicate who provides clinical leadership (their post and position within the organisation):</td>
</tr>
<tr>
<td>Question</td>
<td>YES</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>-----</td>
</tr>
<tr>
<td>Is the service a member of a Clinical Network?</td>
<td></td>
</tr>
<tr>
<td>a If yes, please identify which one, and provide the name of the clinical lead AND the network manager</td>
<td></td>
</tr>
<tr>
<td>b Is the Clinical Network provider led?</td>
<td></td>
</tr>
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<td>c Is there commissioner involvement in the Clinical Network?</td>
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<td>Do you provide medical training?</td>
<td>YES</td>
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<tr>
<td>a Please list the training you provide clearly indicating who it is for and at what level it is targeted (e.g. undergraduate / postgraduate)</td>
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<tr>
<td>b Please describe any funding you receive for this (how much and from whom):</td>
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<td>Do you provide nursing training?</td>
<td>YES</td>
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<td>Please tell us about any other training you provide:</td>
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<td>Please describe any funding you receive for this (how much and from whom):</td>
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<td>Do you provide clinical governance to any other clinical services?</td>
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<td>a Who do you provide clinical governance for?</td>
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<td>b Please describe the arrangements for this:</td>
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### Service changes for 2008/09

**Please fill in responses in the white spaces below. Use TAB or ‘→’ key to move to the next answer box. Use ‘←’ key to move back to the previous box.**

<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
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| 29 | Please list in the boxes provided any commissioned / funded changes (i.e. those developed as a result of new investment) in service delivery for 2008/09 with information that includes:  
  1. Aim of the service  
  2. Whether this will be jointly provided, and if so with whom (e.g. contraceptive service, GP, pharmacy, Chlamydia screening)  
  3. Target users / priority groups  
  4. Location of the service  
  5. Value of planned investment  
  6. Using Appendix A, please identify the levels of service you will be commissioned to deliver |
| | **Funded change 1:**  
| | **Value of planned investment - £**  
| | **LEVEL 1** | **LEVEL 2** | **LEVEL 3** |
| | | | | |
| | **Funded change 2:**  
| | **Value of planned investment - £**  
| | **LEVEL 1** | **LEVEL 2** | **LEVEL 3** |
| | | | | |
| If you need further space to complete this question, please go to the end of the questionnaire (question 32 Additional Information) and use the free text box to finish your answer. Please clearly indicate the number of the question you are answering. |
| 30 | Have you, or are you, intending to change the clinical services you offer to patients in 2008-09 without receiving new investment?  
**YES** | **NO** |
| If Yes, please answer the rest of this question  
If No, please proceed to question 31. |
| If yes, using Appendix A, please identify what services you will be providing in addition to those already identified in question 7, and at what level these will be delivered: |
| 31 | Please describe any gaps in your service (not already identified) and plans to address these, including:  
  1. Funding  
  2. Capital building / infrastructure / equipment  
  3. Clinical service  
  4. IT issues  
  5. Other |
Notes and Appendices

Appendix A - National Strategy definitions for Levels 1, 2 and 3 Sexual Health services

Level 1
• Sexual history taking, risk assessment and sign posting
• Asymptomatic STI testing and treatment (men and women)
• ‘Simple’ partner notification
• HIV testing (including pre-test discussions and giving results)
• Point of care HIV testing
• Pregnancy testing and counselling
• Referral for Termination of Pregnancy
• Provision of hormonal emergency contraception
• Contraception information
• Condom distribution
• Health promotion
• Hormonal contraception /depo
• Cervical screening and referral
• Screening and vaccination for Hepatitis B
• Chlamydia screening for men and women under 25 years as part of the National Chlamydia Screening Programme (NCSP)

Level 2
• Level 1 plus:
• IUD insertion and removal (including emergency IUD)
• Contraception implant insertion and removal
• Symptomatic STI testing and treatment (men and women)
• Counselling and referral for vasectomy

Level 3
• Level 1 and 2 plus:
• Specialist Level; responsible for supporting provider quality, teaching and training and clinical governance (e.g. support for GPs and pharmacists and via networks)
• STI outreach
• Contraception outreach
• Specialist services for ‘at risk groups’ e.g. young people, gay men, CSW
• Specialist infection management
• Genital dermatoses
• Co-ordination of partner notification
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Specialist HIV treatment and care
• Psychosexual / Erectile dysfunction services
• Provision and follow-up of post-exposure prophylaxis for HIV
• Sexual Assault services
Appendix 3

Project Advisory Group

Chair

Dr Andrew Howe
MedFASH Consultant (from January 2008)
Interim Director of Public Health, Harrow PCT (from August 2008)

Members

Gary Alessio
Service Development Manager, Sexual Health & HIV, Westminster PCT

Dr Nike Arowobusoye
Specialist Trainee in Public Health, London Health Observatory

Myat Arrowsmith
Strategic Commissioner, HIV/Sexual Health, Camden Council & PCT

Dr Lesley Bacon
Consultant in Reproductive Health, Lewisham

Dr Simon Barton
Consultant in HIV/GUM, Chelsea & Westminster Hospital, Clinical
Advisor to London Sexual Health Programme

Stephen Bitti
Associate Delivery Manager for Sexual Health, National Support Team
for Sexual Health, Department of Health

Dr Michael Brady
Consultant in GU & HIV, Kings College Hospital and Medical Director of
Terence Higgins Trust

Monique Carayol
Commissioner, Ealing PCT

Dr Paul Crook
Lead for Sexual Health, HPA Local/Regional Services, London

Adam Crosier
MedFASH Consultant

Patrick Dollard
Public Health Officer, Haringey PCT

Dr Laura Fabunmi
SPR Public Health, London Health Observatory

Carole Furlong
Assistant Director, Data & Analysis, London Health Observatory

Ann Furedi
Chief Executive, British Pregnancy Advisory Service

Robert Goodwin
HIV/Sexual Health Contract Manager & Sexual Health Commissioning
Lead, Department of Health

Ruth Lowbury
Executive Director, MedFASH

Dr Helen Maguire
Consultant Regional Epidemiologist, HPA London Region

Jane Mezzone
Delivery Manager, National Support Team for Sexual Health,
Department of Health

Magnus Nelson
Project support, MedFASH

Dr Emma Robinson
Consultant in Public Health, Lambeth PCT
Dr Celia Skinner  Consultant in GU & HIV, Barts and the London Hospital, Chair NE London Sexual Health & HIV Clinical Network

Dr Connie Smith  Consultant in Family Planning and Reproductive Health Care

Hong Tan  London Sexual Health Programme Director

Stephen Tucker  NWL HIV Commissioning Lead & Sexual Health Lead for Kensington & Chelsea PCT

Claire Tyler  MedFASH Consultant

Lynne Walsh  MedFASH Consultant

Dr Ruth Wallis  Director of Public Health, Lambeth PCT

Dr Chris Wilkinson  Consultant in Sexual & Reproductive Health, Clinical Advisor to London Sexual Health Programme
Appendix 4

Project definitions for Levels 1, 2 and 3 sexual health services
Adapted from the National Strategy for Sexual Health & HIV

Level 1
• Sexual history taking, risk assessment and sign posting
• Asymptomatic STI testing and treatment (men and women)
• ‘Simple’ partner notification
• HIV testing (including pre-test discussions and giving results)
• Point of care HIV testing
• Pregnancy testing and counselling
• Referral for termination of pregnancy
• Provision of hormonal emergency contraception
• Contraception information and services
• Condom distribution
• Health promotion
• Hormonal contraception/depot
• Cervical screening and referral
• Screening and vaccination for Hepatitis B

Level 2
• Level 1 plus:
  • IUD insertion and removal (including emergency IUD)
  • Contraception implant insertion and removal
  • Symptomatic STI testing and treatment (men and women)
  • Counselling and referral for vasectomy

Level 3
• Level 1 and 2 plus:
  • Specialist level: responsible for supporting provider quality, teaching and training and clinical governance (e.g. support for GPs and pharmacists and via networks)
  • STI outreach
  • Contraception outreach
  • Specialist services for ‘at risk groups’ e.g. young people, gay men, CSW
  • Specialist infection management
  • Genital dermatoses
  • Co-ordination of partner notification
  • Highly specialised contraception
  • Difficult IUD insertion and removal
  • Difficult implant removal
  • Specialist HIV treatment and care
  • Psychosexual/erectile dysfunction services
  • Provision and follow-up of post-exposure prophylaxis for HIV
  • Sexual assault services
## Appendix 5 Commissioning finance summary

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<th>LONDON PCTs - Sexual Health Commissioning 2007/08 £ summary</th>
<th>Total PCT budget (recurrent and non recurrent funding) 2007/08 £ 000</th>
<th>Total spend on sexual health services as % of total PCT budget</th>
<th>Total spend on sexual health services itemised in service mapping 2007/08 £</th>
<th>GUM</th>
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## LONDON PCTs - Sexual Health Commissioning 2007/08 £ summary

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**Data Source**: NHS London, NHS London PCT, Provider Arm, Various

- **Bexley Care Trust Provider Arm**: Bexley Care Trust
- **Bromley Hospital NHS Trust Provider Services**: Bromley Hospital NHS Trust
- **Greenwich PCT Provider Services**: Greenwich PCT
- **Lewisham PCT Provider Services**: Lewisham PCT
- **Southwark PCT Provider Services**: Southwark PCT

**Provider Services**: BPAS, MSI, Various

**Services**: GUM, CRSH, Other SH, Abortion, NCSP, Enhanced Services in General Practice, Pharmacy, Prevention

**Budget Distribution**

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**South East London**

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## 6a) Needs assessment

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<tr>
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<tr>
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<tr>
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*The PCT carried one out in 2002

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### 6b) Sexual health strategy

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<td>Bromley</td>
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<td>Redbridge</td>
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<td>Richmond &amp; Twickenham</td>
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<td>Westminster</td>
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| Total number | 22 | 4 | 5 |
| Total %      | 71% | 13% | 16% |

*draft strategy in place
### 6c) Service specifications

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<th>Were service specifications used in 2007/08?</th>
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<th>Abortion</th>
<th>CRSH</th>
<th>Enhanced services in General Practice</th>
<th>HIV/STI Prevention</th>
<th>NCSP</th>
<th>3rd sector / voluntary organisations</th>
<th>pharmacy based sexual health services</th>
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* these service specifications were for the integrated service commissioned

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6d) Commissioner capacity

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<th>Table showing commissioner capacity in 2007/08</th>
<th>Where does responsibility for sexual health sit within the PCT?</th>
<th>% of post dedicated to sexual health &amp; HIV</th>
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</table>

* 2 other posts also have % dedicated to sexual health / HIV. This amounts to 65% (shared across both posts)

Total number: 12 7 9 3
Total %: 39% 23% 29% 9%
## GUM, Community Sexual and Reproductive Health (CSRH) & non-NHS (clinical) providers in London 2007/08

<table>
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<tr>
<th>GUM, Community sexual and reproductive health (CSRH) &amp; non-NHS (clinical) providers in London 2007/08</th>
<th>Access, activity &amp; premises</th>
<th>Clinical Services offered</th>
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<td>Total hours open (per week)</td>
<td>Number of hours open after 7pm or at weekends</td>
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<td>Barnet PCT</td>
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<tr>
<td>GUM - Clare Simpson Clinic (Barnet &amp; Chase Farms NHS Trust)</td>
<td>41.0</td>
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<td>GUM - Archway Sexual Health Clinic (Camden PCT Provider Services)†</td>
<td>41.5</td>
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<td>GUM - Mortimer Market Centre (Camden PCT Provider Services)</td>
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<td>GUM - Mertonborough Department of Sexual Health* (Royal Free Hospital NHS Trust)</td>
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<td>CSRH - Sexual &amp; Reproductive Health Service (Camden &amp; Islington PCTs)</td>
<td>44.0</td>
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<td>Brook Euston Clinic</td>
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<td>40.5</td>
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<td>CSRH - Sexual Health, Contraception &amp; Reproductive Care Service (St Ann’s Hospital, Haringey PCT)</td>
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<td>25.0</td>
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<td>Type of access: Walk-in / Appointment / Mixed</td>
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<td>Number of attendances to the service</td>
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<td>Of these, % that were first attendances</td>
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<td>Number of these under 25</td>
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<td>% of attendances from commissioning PCT</td>
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<td>New to follow up ratio (GUM only)</td>
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<tr>
<td>Are premises 'fit for purpose'?</td>
<td>Level 1</td>
<td>Level 2</td>
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<td>Level 1</td>
<td>Level 2</td>
<td>Level 3</td>
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<tr>
<td>Screening</td>
<td>Treatment</td>
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**North East London**

**Barking & Dagenham PCT**

| GUM - Chlamydia Screening Programme (BHR Hospitals NHS Trust)* | 40.0 | 0.0 | 0% | mixed | 13,982 | 57% | data not available | 66% | 1:0.4 | No | Yes | Yes | Yes | No | Yes | Yes | Yes |
| CBRH - Community Sexual Health Service (City & Hackney PCT) | - | - | - | - | 2,234 | - | 100% | - | - | - | - | Yes | - | - | Yes | Yes | Yes |
| THT - Chlamydia Screening Programme** | 2.0 | 2.0 | 100% | walk-in | 971 | 100% | - | - | Yes | No | No | Yes | Yes | No | No | Yes | No |

**City & Hackney PCT**

| GUM - Department of Sexual Health (Homerton University Hospital NHS Foundation Trust) | 38.5 | 0.0 | 0% | walk-in | 24,718 | 64% | 33% | 52.85% | 1:0.33 | No | Yes | Yes | Yes | No | Yes | Yes | Yes |
| CBRH - Community Sexual Health Service (City & Hackney PCT) | 37.0 | 7.0 | 10% | mixed | 18,388 | 50% | data not available | 87.9% | - | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| THT - Ajamu | 6.0 | - | - | walk-in | 130 | 100% | - | - | Yes | No | No | Yes | Yes | No | No | Yes | No |

**Havering PCT**

| GUM - see Barking & Dagenham PCT | 50.5 | 18.0 | 30% | mixed | 16,548 | 66% | data not available | data not available | - | Yes | Yes | No | Yes | Yes | Yes | Yes | No |
| CBRH - Contraceptive & Reproductive Health Service (Havering PCT) | - | - | - | - | - | - | - | - | Yes | Yes | No | No | Yes | Yes | Yes | Yes | No |

**Newham PCT**

| GUM - Greenway Centre (Newham University Hospital) | 36.5 | 2.0 | 5% | walk-in | 13,978 | 58% | 38% | 72% | 1:0.37 | Yes | Yes | Yes | Yes | Yes | No | Yes | No | No |
| CBRH - Family Planning & Sexual Health Service (Newham PCT) | 36.0 | 13.0 | 34% | mixed | 12,809 | 44% | 36% | 95% | - | Yes | Yes | No | No | Yes | Yes | Yes | Yes |
| THT Programme to support local CBO | - | - | - | - | 480 | 100% | - | - | - | Yes | Yes | No | No | No | Yes | No | No |

**Redbridge PCT**

| GUM - see Barking & Dagenham PCT | 36.5 | 3.0 | 5% | mixed | 50,770 | 64% | 31.8% | 23.5% | 1:0.6 | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| CBRH - Family Planning Service (Redbridge PCT) | 36.0 | 1.0 | 3% | mixed | 18,611 | 25% | 40% | 95% | - | No | Yes | No | No | Yes | Yes | Yes | Yes |
| Brook Health Care & Outreach | 4.0 | 8.5 | 55% | walk-in | 464 | 100% | - | - | Yes | No | No | Yes | Yes | Yes | Yes | Yes | Yes |

**Tower Hamlets PCT**

| GUM - Ambrose King Centre & Barts Sexual Health Centre (Barts & The London NHS Trust) | 55.0 | 4.0 | 5% | mixed | 50,770 | 64% | 31.8% | 23.5% | 1:0.6 | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| CBRH - Women's & Young People's Service (Tower Hamlets PCT) | 58.0 | 2.0 | 3% | mixed | 18,611 | 25% | 40% | 95% | - | No | Yes | No | No | Yes | Yes | Yes | Yes |
| THT Eastside | 4.0 | 1.0 | 38% | walk-in | 58 | 100% | - | - | Yes | Yes | No | Yes | Yes | No | Yes | No | Yes |

**Waltham Forest PCT**

| GUM - Whipps Cross University Hospital NHS Trust (Dept. of Sexual Health) | 36.0 | 1.0 | 3% | mixed | 7,023 | 50% | 33% | 60% | 1:0.8 | No | Yes | Yes | Yes | No | Yes | No | No |
| CBRH - Sexual Health Service (Waltham Forest PCT) | 43.0 | 8.5 | 20% | mixed | 19,336 | 43% | 19% | data not available | - | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes |
### Premises Outreach

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<th>Activity</th>
<th>Premises</th>
<th>STI testing &amp; treatment</th>
<th>Outreach</th>
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<td>% of hours open after 7pm or at weekends</td>
<td>type of access: Walk-in / Appointment / Mixed</td>
<td>Number of attendances to the service</td>
<td>Of these, % that were first attendances</td>
<td>Number of these under 25</td>
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<tr>
<td><strong>North West London</strong></td>
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<td>12,739</td>
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<td>0.0</td>
<td>0%</td>
<td>Mixed</td>
<td>295</td>
<td>100%</td>
</tr>
<tr>
<td>Ealing PCT</td>
<td>GUM - Pasteur Suite (Ealing Hospital NHS Trust)</td>
<td>14.0</td>
<td>0.0</td>
<td>0%</td>
<td>mixed</td>
<td>10,287</td>
<td>67%</td>
</tr>
<tr>
<td>Ealing PCT</td>
<td>CSRH - Reproductive &amp; Sexual Health Service (Ealing PCT)</td>
<td>45.0</td>
<td>14.5</td>
<td>32%</td>
<td>mixed</td>
<td>19,251</td>
<td>58%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham PCT</td>
<td>GUM - West London Centre for Sexual Health (Charing Cross Hospital) service provided by Chelsea &amp; Westminster Hospital NHS Foundation Trust</td>
<td>44.5</td>
<td>5.0</td>
<td>11%</td>
<td>mixed</td>
<td>19,684</td>
<td>78%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham PCT</td>
<td>CSRH - Contraceptive &amp; Reproductive Health Service (Westside Contraceptive Services, part of Westminster PCT)</td>
<td>38.5</td>
<td>4.3</td>
<td>11%</td>
<td>mixed</td>
<td>12,403</td>
<td>65%</td>
</tr>
<tr>
<td>Harrow PCT</td>
<td>GUM - Northwick Park GUM Clinic (Northwick Park Hospital, part of North West London Hospitals NHS Trust)*</td>
<td>35.0</td>
<td>1.0</td>
<td>3%</td>
<td>mixed</td>
<td>10,608</td>
<td>73%</td>
</tr>
<tr>
<td>Harrow PCT</td>
<td>CSRH - Contraceptive &amp; Reproductive Health Service (Northwick Park Hospital)</td>
<td>50.0</td>
<td>4.0</td>
<td>8%</td>
<td>mixed</td>
<td>17,142</td>
<td>41%</td>
</tr>
<tr>
<td>Harrow PCT</td>
<td>Brook Clinic</td>
<td>data not provided</td>
<td>171</td>
<td>100%</td>
<td>-</td>
<td>data not provided</td>
<td>-</td>
</tr>
</tbody>
</table>

*service jointly commissioned by Harrow & Brent PCTs

**Contraception NCSP**

GUM, Community sexual and reproductive health (CSRH) & non-NHS (clinical) providers in London 2007/08
<table>
<thead>
<tr>
<th>GUM, Community sexual and reproductive health (CSRH) &amp; non-NHS (clinical) providers in London 2007/08</th>
<th>Access, activity &amp; premises</th>
<th>Clinical Services offered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Access</td>
<td>Activity</td>
</tr>
<tr>
<td></td>
<td>Total hours open (per week)</td>
<td>Number of hours open after 7pm or at weekends</td>
</tr>
<tr>
<td>Hillingdon PCT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Tudor Centre (Hillingdon Hospital NHS Trust)</td>
<td>40.5</td>
<td>1.0</td>
</tr>
<tr>
<td>CSRH - Family Planning &amp; Sexual Health Service (Hillingdon PCT)</td>
<td>88.0</td>
<td>39.0</td>
</tr>
<tr>
<td>Brook Hayes</td>
<td>5.5</td>
<td>4.0</td>
</tr>
<tr>
<td>Hounslow PCT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Sexual Health Clinic (West Middlesex University Hospital NHS Trust)</td>
<td>31.0</td>
<td>9.0</td>
</tr>
<tr>
<td>CSRH - Family Planning Service (Hounslow PCT)</td>
<td>54.0</td>
<td>8.5</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea PCT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - John Hunter Clinic for Sexual Health (St Stephen's Centre) (Chelsea &amp; Westminster Hospitals NHS Foundation Trust)</td>
<td>43.5</td>
<td>1.5</td>
</tr>
<tr>
<td>GUM - Victoria Clinic for HIV &amp; Sexual Health (South Westminster Centre) (Chelsea &amp; Westminster Hospitals NHS Foundation Trust)</td>
<td>47.0</td>
<td>9.0</td>
</tr>
<tr>
<td>CSRH - Contraceptive &amp; Reproductive Health Service (Westside Contraceptive Services, part of Westminster PCT)</td>
<td>49.3</td>
<td>8.5</td>
</tr>
<tr>
<td>Westminster PCT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Jeffries Wing for Sexual Health, St Mary's Hospital (Imperial College Healthcare Trust)</td>
<td>50.3</td>
<td>0.0</td>
</tr>
<tr>
<td>CSRH - Contraceptive &amp; Reproductive Health Service (Westside Contraceptive Services, part of Westminster PCT)</td>
<td>37.0</td>
<td>3.0</td>
</tr>
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</table>

*provided in outreach settings
<table>
<thead>
<tr>
<th>Access</th>
<th>Activity</th>
<th>Premises</th>
<th>STI testing &amp; treatment</th>
<th>Outreach</th>
<th>Contraception</th>
<th>NCSP</th>
</tr>
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<tbody>
<tr>
<td><strong>Total hours open (per week)</strong></td>
<td>% of hours open after 7pm or at weekends</td>
<td>Number of attendances to the service</td>
<td>% of attendances from commissioning PCT</td>
<td>Level 1</td>
<td>Level 2</td>
<td>Level 3</td>
</tr>
<tr>
<td><strong>South East London</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Bexley PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CSRH - Youth Advisory Service (Contraception)</td>
<td>20.5</td>
<td>1.0</td>
<td>5%</td>
<td>walk-in</td>
<td>2,073</td>
<td>60%</td>
</tr>
<tr>
<td><strong>Bromley PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Beckenham Hospital (Bromley Hospitals NHS Trust)</td>
<td>31.0</td>
<td>1.0</td>
<td>3%</td>
<td>mixed</td>
<td>9,376</td>
<td>64%</td>
</tr>
<tr>
<td>CSRH - Contraception &amp; Reproductive Health Service (Bromley PCT)</td>
<td>16.0</td>
<td>10.0</td>
<td>63%</td>
<td>mixed</td>
<td>10,200</td>
<td>53%</td>
</tr>
<tr>
<td><strong>Greenwich PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Trafalgar Clinic (Queen Elizabeth Hospital NHS Trust)</td>
<td>43.0</td>
<td>1.0</td>
<td>2%</td>
<td>mixed</td>
<td>18,441</td>
<td>63%</td>
</tr>
<tr>
<td>CSRH - Contraceptive &amp; Sexual Health Service (Greenwich PCT)</td>
<td>30.0</td>
<td>5.0</td>
<td>17%</td>
<td>mixed</td>
<td>15,212</td>
<td>67%</td>
</tr>
<tr>
<td><strong>Lambeth PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Lydia and Lloyd Clinics (Guy's &amp; St Thomas' NHS Foundation Trust)</td>
<td>76.0</td>
<td>1.0</td>
<td>1%</td>
<td>mixed</td>
<td>41,408</td>
<td>68%</td>
</tr>
<tr>
<td>CSRH - Reproductive &amp; Sexual Health Service (Lambeth PCT)</td>
<td>52.0</td>
<td>9.0</td>
<td>17%</td>
<td>mixed</td>
<td>23,946</td>
<td>59%</td>
</tr>
<tr>
<td>CSRH - King's College Hospital Reproductive &amp; Sexual Health Service (King's College Hospital)</td>
<td>66.0</td>
<td>6.0</td>
<td>9%</td>
<td>mixed</td>
<td>24,108</td>
<td>64%</td>
</tr>
<tr>
<td>Brook Brixton Clinic</td>
<td>22.5</td>
<td>2.5</td>
<td>11%</td>
<td>walk-in</td>
<td>6,271</td>
<td>-</td>
</tr>
<tr>
<td><strong>Lewisham PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CSRH - Reproductive &amp; Sexual Health Service (Lewisham PCT)</td>
<td>146.6</td>
<td>19.0</td>
<td>13%</td>
<td>mixed</td>
<td>52,614</td>
<td>49%</td>
</tr>
<tr>
<td><strong>Southwark PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Caldecot Centre for Sexual Health &amp; HIV (King's College Hospital NHS Foundation Trust)</td>
<td>40.0</td>
<td>2.0</td>
<td>5%</td>
<td>walk-in</td>
<td>21,310</td>
<td>77%</td>
</tr>
<tr>
<td>CSRH - Reproductive &amp; Sexual Health Service (Southwark PCT)</td>
<td>74.0</td>
<td>7.0</td>
<td>9%</td>
<td>mixed</td>
<td>19,208</td>
<td>53%</td>
</tr>
<tr>
<td>Brook East Street Clinic</td>
<td>28.0</td>
<td>3.0</td>
<td>11%</td>
<td>walk-in</td>
<td>6,226</td>
<td>-</td>
</tr>
<tr>
<td>Access, activity &amp; premises</td>
<td>Clinical Services offered</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------</td>
<td>---------------------------</td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>South West London</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Croydon PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Department of GU Medicine (Mayday University Hospital NHS Trust)</td>
<td>43.0</td>
<td>1.0</td>
<td>2%</td>
<td>mixed</td>
<td>21,925</td>
<td>60%</td>
</tr>
<tr>
<td>CSRH - Contraception &amp; Sexual Health Service (Croydon PCT)</td>
<td>45.0</td>
<td>7.5</td>
<td>17%</td>
<td>mixed</td>
<td>10,093</td>
<td>c50%</td>
</tr>
<tr>
<td><strong>Kingston PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Wolverton Clinic (Kingston Hospital NHS Trust)</td>
<td>40.0</td>
<td>1.5</td>
<td>4%</td>
<td>mixed</td>
<td>13,941</td>
<td>74%</td>
</tr>
<tr>
<td>CSRH - Family Planning Service (Kingston PCT)</td>
<td>12.5</td>
<td>3.0</td>
<td>24%</td>
<td>mixed</td>
<td>2,898</td>
<td>36%</td>
</tr>
<tr>
<td><strong>Richmond &amp; Twickenham PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - see Hounslow PCT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CSRH - Contraceptive &amp; Sexual Health Service (Richmond &amp; Twickenham PCT)</td>
<td>10.0</td>
<td>2.0</td>
<td>20%</td>
<td>mixed</td>
<td>4,296</td>
<td>55%</td>
</tr>
<tr>
<td><strong>Sutton &amp; Merton PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Medical GU Department (Epsom &amp; St Helier NHS Trust)</td>
<td>34.0</td>
<td>1.0</td>
<td>3%</td>
<td>mixed</td>
<td>8,316</td>
<td>64%</td>
</tr>
<tr>
<td>CSRH - Family Planning Service (Sutton &amp; Merton PCT)</td>
<td>35.8</td>
<td>25.0</td>
<td>71%</td>
<td>mixed</td>
<td>17,858</td>
<td>60%</td>
</tr>
<tr>
<td><strong>Wandsworth PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GUM - Courtyard Clinic (St George's Hospital NHS Trust)</td>
<td>43.0</td>
<td>3.5</td>
<td>8%</td>
<td>mixed</td>
<td>32,271</td>
<td>77%</td>
</tr>
<tr>
<td>GUM - Roehampton Clinic (Queen Mary's Hospital - service provided by St George's Hospital NHS Trust)</td>
<td>31.5</td>
<td>1.0</td>
<td>3%</td>
<td>mixed</td>
<td>10,647</td>
<td>63%</td>
</tr>
<tr>
<td>CSRH - Reproductive Sexual Health Service (Wandsworth PCT)</td>
<td>56.5</td>
<td>13.8</td>
<td>24%</td>
<td>mixed</td>
<td>22,018</td>
<td>37%</td>
</tr>
</tbody>
</table>
Appendix 8 – Commissioning Data Sheets

Barking & Dagenham PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within commissioning. The Director of Commissioning has overall responsibility. The Head of Public Health and Children’s Commissioner leads on sexual health commissioning. 40-50% of this post is dedicated to sexual and reproductive health. Other responsibilities include maternity, children’s services (jointly with the London Borough of Barking & Dagenham) and cancer services (across the outer North East London sector).

The Head of Public Health and Children’s Commissioner is also the Lead Commissioner for chlamydia screening across Waltham Forest, Redbridge and Barking & Dagenham PCTs, and the host commissioner for the newly established integrated sexual health services across Barking & Dagenham, Redbridge and Havering PCTs.

Sexual health needs assessment

In December 2007 the PCT commissioned a needs assessment reviewing HIV services. This is due for completion in July 2008. In May 2008 the PCT commissioned a needs assessment on young people’s sexual and reproductive health, due for completion in September 2008. The PCT aims to use findings as a basis for commissioning.

Sexual health strategy

The PCT does not currently have a sexual health strategy. One is currently being written by Health Improvement, in collaboration with the London Borough of Barking & Dagenham. The strategy is being developed in consultation with stakeholders which include service users, schools, voluntary sector and NHS providers. The strategy is expected to inform the development of service specifications and commissioning intentions.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £1,720,088 which represented 0.63% of the total PCT budget.

Detailed service specifications were used for the commissioning of an integrated sexual health service which included the following components: GUM, HIV, reproductive health, sexual health promotion, chlamydia and gonorrhoea screening, teenage pregnancy. The pan-London Commissioning Guidelines for Abortion Service were also used.

GUM services

The hosted provider of GUM services at Levels 1, 2 and 3 was Barking, Havering and Redbridge Hospitals NHS Trust. In 2008/09 this service will be provided as part of an integrated sexual health service.

Community contraceptive / family planning services

Services were provided by the following:

Havering PCT Provider Arm (on behalf of Barking & Dagenham PCT) provided Levels 1 and 2 STI screening and treatment services, and Levels 1 and 2 contraceptive / family planning services. In 2008/09 this contract will be provided as a part of an integrated sexual health service.
Other commissioned sexual health services

The sole provider was Brook which provided Levels 1 and 2 STI screening and treatment services, and Level 1 and 2 contraceptive / family planning services.

Abortion services

The sole provider of services was Marie Stopes International, with a contract based on indicative volume (number of procedures). The provider offered the following services; medical to 9 weeks, local anaesthetic to 12 weeks, conscious sedation to 19 weeks, general anaesthetic to 24 weeks. The contract also allowed for contraceptive pill supplies given to the woman, IUCD or IUS fitted at the time of procedure, Depo-Provera or Implanon given at the time of procedure and sterilisation performed at the time of procedure and providing patients with a leaflet about chlamydia and chlamydia screening.

National Chlamydia Screening Programme

There were collaborative commissioning arrangements in place between Barking & Dagenham, Redbridge and Waltham Forest PCTs. The Terrence Higgins Trust was the appointed provider. There was a LES for screening and treatment with 25 community pharmacies. In 2008/09 the PCT is developing a LES for GPs.

Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission any sexual health services provided by GPs outside of the GMS contract.

Pharmacy based services

A LES was in place in 25 pharmacies across the PCT to provide chlamydia and gonorrhoea testing kits (containing self taken swabs or urine sample pots) under the NCSP.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Caress - a support group for HIV positive people.

Widows and Orphans delivered health promotion campaign targeted at African communities.

Positive East delivered social welfare assessments for HIV positive people.

Terrence Higgins Trust delivered HIV prevention and assessments.

Elop provided counselling for young, gay, bisexual, lesbian and transsexual people.

Joint commissioning with London Borough of Barking & Dagenham - for social care/HIV (pooled budget)

Service networks

The PCT engaged with providers via the North East London Commissioners Network, the strategy board for integrated sexual health services and the local partnership Sexual Health and HIV Prevention group.

The PCT engaged with service users via support groups (CARESS) and through consultation via needs assessment and service reviews.

Referral pathways

Referral pathways were defined and agreed between the services identified below:

Primary care and GUM
Contraceptive services and GUM
Voluntary sector and GUM
GUM and contraceptive services
Primary care and contraceptive services
NCSP and contraceptive services
NCSP and pharmacy

Clinical network

The PCT’s providers are members of the North East London Sexual Health and HIV Network. The network is provider led, and has commissioner involvement.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting. The new integrated sexual health service provides for a hub and spoke model with Levels 1 and 2 STI testing and treatment and Levels 1 and 2 contraceptive and young people’s sexual and reproductive health service delivered in a variety of settings.

New investment plans for 2008/09 include:

Contraceptive service at Levels 1 and 2.

African communities to provide HIV rapid testing (Level 1).

Local condom distribution scheme (Level 1).
Barnet PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, responsibility for sexual health is shared across commissioning, public health, finance and primary care. The Director of Commissioning and Planning has overall responsibility. The Acute Commissioning Manager leads on sexual health. 20% of the Commissioning Manager's post is dedicated to sexual health and HIV.

Sexual health needs assessment

Between January-April 2008 the PCT undertook a rapid needs assessment, using a public health consultant employed on a locum basis with Department of Health funding.

As the PCT develops further capacity in the community, focused service specifications will enable innovative procurement.

Sexual health strategy

In March 2008 the PCT published a sexual health strategy. This was informed by sexual health providers, including acute trusts, voluntary sector providers, community providers, users and the local authority.

The sexual health needs assessment has formed the basis for the work plan which accompanies the PCT Sexual health strategy. The targeting focuses on the areas of most need geographically in order that service re-design ensures better access to services. The aim is to make service development as holistic as possible and to increase uptake of services. The strategy is due for revision in 2011, but will be monitored and reviewed annually.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £2,536,100 which represented 0.56% of the total PCT budget.

Detailed service specifications were used for the following: GUM services, HIV prevention services.

GUM services

The hosted provider of GUM services at Levels 1, 2 and 3 was the Clare Simpson Clinic, Barnet and Chase Farm Hospitals NHS Trust.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services was Barnet PCT Provider Services (Contraceptive and Reproductive Service, Vale Drive Health Centre). This provider was also commissioned to deliver STI screening and treatment.

In 2008/09 there will be more focus on services for young people. Service specifications allied to the sexual health work programme will be developed to inform strategic commissioning. These will include monitoring of specific activities allied with Levels 1, 2 and 3. There will be a review of all contraceptive services which will inform ‘in year’ changes to the contract.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.
Abortion services

Services were provided by the following:

**Marie Stopes International.** This was a cost and volume contract against locally negotiated prices for a 3 year period. The provider offers the following services: medical terminations to 9 weeks, surgical terminations up to 12 weeks - non anaesthetic, up to 14 weeks - conscious sedation, up to 14 weeks - general anaesthetic, 14+1 to 19 weeks - conscious sedation, 14+1 to 19 weeks - general anaesthetic, 19+1 to 24 weeks - general anaesthetic. The provider also offered the following contraceptive options: Mirena, Implanon, IUCD (fitted at op), Depo-Provera as well as prophylactic antibiotics.

In 2008/09 medical and surgical day case procedures will be provided at Edgware Community Hospital (Day Surgery Unit on Saturdays). This is the first time the PCT has offered a local abortion service within the borough.

**Royal Free Hospital, London.** This was PbR contract as part of the trust’s main SLA with Barnet PCT. The provider offered medical abortions up to 9 weeks, and surgical up to 24 weeks.

**National Chlamydia Screening Programme**

The PCT’s interim service was commissioned between January and March 2008 from the PCT provider arm against a clear specification. Alongside this the PCT set up an enhanced service for GPs.

The PCT is currently undertaking a procurement exercise to secure a permanent NCSP provider.

Marie Stopes International also provided some screening but this was delivered as part of its current contract arrangements with the PCT.

In 2008/09 the PCT is planning to establish an enhanced service contract with community pharmacists. The procurement process for the substantive provider should be concluded by September 2008. Until then interim arrangements as described above remain in place.

**Sexual health services provided by GPs outside of the GMS contract**

Services were delivered via either a LES or PMS contract by 13 GP practices across the PCT. The contract specified delivery of Level 1 STI screening and treatment and Level 2 contraceptive services.

The contract specified a tariff for a full screen and condom teach (where requested) for each registered patient. A higher tariff was paid for patients not registered with the practice. The tariff price also included the recording and monthly submission of data and attending meetings where appropriate. An additional tariff was payable where positive diagnosis required follow-up, treatment and contact tracing. Practices providing condoms and pregnancy tests where appropriate were reimbursed separately.

In 2008/09 the PCT will evaluate these contracts to determine any necessary changes.

**Pharmacy based services**

The PCT had no contracts for pharmacy based services in 2007/08. However emergency hormonal contraception was provided in pharmacies via Teenage Pregnancy funding. In 2008/09 this will be funded via new PCT investment.

**Locally-commissioned HIV and primary STI prevention**

Services were provided by the following:

**Awaredressers Project - Barnet PCT Provider Arm** undertook community work to enable reduction of HIV, reduction of gonorrhoea and enable access to GUM services. This work was delivered in localities identified as high need (Burnt Oak and Colindale) focussing on the African community.

**PACE** - promoted lesbian and gay health and wellbeing via workshops and youth assessments. In 2008/09 the PCT will evaluate the outcomes and benefits of this programme.

**Jewish AIDS Trust** provided SRE in Jewish schools and workshops for young people in a range of settings.
NAZ Project targeted African communities.

Service networks

The PCT has recently approved a provider network, which replaces an old strategy group.

The PCT is reviewing its engagement with service users following the relaunch of the sexual health work programme in Barnet. The provider network will discuss the engagement of users and how this is to be reflected and utilised. The PCT has an established user forum within its Provider Arm.

A website is being developed which will have a user feedback forum and direct contact to a Clinical Lead.

Referral pathways

Referral pathways were defined and agreed between the services identified below:

Primary care and contraceptive services
NCSP and contraceptive services
NCSP and general practice
NCSP and pharmacy
NCSP and GUM
Voluntary sector and NCSP

More informal referral pathways were in place between:

Contraceptive services and GUM, GUM and contraceptive services, community pharmacy and contraceptive services, voluntary sector and contraceptive services.

Clinical network

The North Central London Sexual Health Network has only just been established formally and arrangements for clinical lead and network management support are yet to be agreed. Funding requirements for PCTs are also to be agreed, although all sector PCTs are expecting to provide a small amount of funding in due course.

Commissioning and NEW investment plans for 2008/09

The sexual health investment plan outline has been considered by the PCT Board. There are business cases to be prepared for the following:

- provision of extra capacity in family planning and contraceptive and reproductive health services
- local voluntary sector providers focussing on young people
- establishment of outreach posts working between GUM and family planning for one-to-one interventions with vulnerable and high risk young people. This includes sexual health prevention work, provision of emergency hormonal contraception.
- funding for a condom distribution scheme

Setup of abortion services at Edgware Community Hospital (as detailed above).

Teenage Pregnancy funding from London Borough of Barnet focussing on SRE projects and pilot of Parentline PlusBarnet.

Emergency hormonal contraception scheme in pharmacies (as detailed above).

The PCT does not plan to shift activity out of an acute setting in 2008/09. However it is working the Provider Arm to maximise the potential of Level 3 services and support increasing capacity. There will be a focus on HIV testing to support the late diagnosis target where the PCT could do better.
Bexley PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, responsibility for sexual health is shared across commissioning and public health. The Director of Commissioning has overall responsibility, and the Assistant Director of Public Health (20%) and the Commissioning Manager (10%) share the lead on commissioning sexual health services.

Sexual health needs assessment

In 2007 the PCT undertook a service-targeted needs assessment as part of a review of local service provision and the development of a plan to improve community sexual health service provision as well as to address the financial impact on Bexley Care Trust of dehosting GUM services. The needs assessment included the gathering of available statistics on teenage pregnancy, STIs etc, and a calculation of estimates for the prevalence of different STIs in the Bexley population.

Sexual health strategy

In 2003 the PCT published a sexual health strategy. This was informed by consultation within the NHS, voluntary sector and the local authority. In order to use the strategy for commissioning it would need to be updated. The date for revision has still to be agreed.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £646,452 which represented 0.23% of the total PCT budget.

The PCT did not use detailed service specifications for services commissioned in 2007/08.

GUM services

The PCT had no hosted GUM service. The closest GUM services are located in Greenwich PCT. In 2007/08 Bexley PCT residents seen in any GUM services were paid for by the host PCTs. In 2008/09, following de-hosting, the PCT will be subject to cross-charging arrangements.

Community contraceptive / family planning services

The sole provider of community contraceptive / youth advisory services at Level 1 was Bexley Care Trust Provider arm. In 2008/09 this provider will be commissioned to deliver STI screening and treatment to support the chlamydia programme.

Other commissioned sexual health services

The sole provider was Northumberland Health Medical Centre which was commissioned to provide a young peoples walk-in youth advisory service. This was funded via the teenage pregnancy strategy.

Abortion services

Services were provided by the following:

Marie Stopes International. This contract was a cost and volume agreement. The provider invoiced the PCT on a monthly basis for actual activity. The provider offered the following services; medical and surgical abortions up to 24 weeks.

British Pregnancy Advisory Service. This contract was a cost and volume agreement. The provider invoiced the PCT on a monthly basis for actual activity. The provider offered the following services; medical and surgical abortions up to 24 weeks.
Queen Elizabeth Hospital Woolwich and Queen Mary’s Sidcup. This was a PbR contract. The provider offered the following services; medical and surgical abortions up to 24 weeks

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between 3 PCTs (Bexley, Bromley and Greenwich, with the latter acting as lead PCT).

Sexual health services provided by GPs outside of the GMS contract

The PCT had no contracts for sexual health services provided by GPs outside of the GMS contract in 2007/08.

Pharmacy based services

There was an enhanced service contract with 13 community pharmacies across the PCT for emergency hormonal contraception for those aged 14-25.

Locally-commissioned HIV and primary STI prevention

There were collaborative commissioning arrangements between Bexley and Greenwich PCTs, with the latter acting as lead PCT.

Services were provided by the following:

AHEAD provided primary prevention and HIV testing in African communities. In 2007/08 the PCT contributed to this contract but only part of this amount was for primary prevention.

Metro provided primary prevention and HIV testing for MSM. In 2007/08 the PCT contributed to this contract but only part of this amount was for primary prevention.

Service networks

The PCT engaged with providers through the South East London Sexual Health Network. The PCT had no user forum or any other service user group that it consulted.

Referral pathways

Referral pathways were defined and agreed between the services identified below:

Primary care and contraceptive services
Community pharmacy and contraceptive services

Clinical network

The PCT’s providers were not members of a clinical network.

Commissioning and NEW investment plans for 2008/09

There are no new investment plans agreed for 2008/09 but business plans are being developed for adult family planning and youth advisory services.

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional or new activity in a non acute setting. The will be informed by a review of STI services for the over-20s.
Brent PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, responsibility for sexual health sits with commissioning. The Director of Strategic Commissioning and Development has overall responsibility. Sexual health commissioning responsibilities are shared between 4 posts in the PCT. The PCT provides the lead for the following:

- Lead Commissioner for North West London Hospital NHS Trust (NWLH) for GUM
- Lead Commissioner for chlamydia screening for Brent, Harrow and Hillingdon PCTs

Sexual health needs assessment

The PCT is due to publish, in August 2008, a Joint Strategic Needs Assessment (JSNA). This was a comprehensive needs assessment using epidemiological data combined with public and patient feedback to determine public health priorities and influence the future commissioning strategy. The JSNA included sexual health.

The JSNA has already influenced the first draft Commissioning Strategy Plan (CSP). Due to the prevalence of HIV/STIs and teenage conceptions it was decided that sexual health was a priority for the PCT and so was included in the initiatives listed and submitted to NHS London.

Sexual health strategy

In August 2005 the PCT published a sexual health strategy. This was informed by local and national voluntary sector providers, GPs, contraceptive services, NWLH, hospices, the PCT and local authority. The process for revising the strategy is underway, with a new action plan due to be completed by August 2008. The PCT has used the strategy as a basis for commissioning.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £5,261,221 which represented approximately 1.25% of the total PCT budget.

Detailed service specifications were used for the following: family planning, all voluntary and non-NHS organisations, GUM services and the NCSP.

GUM services

The hosted provider of GUM services at Levels 1, 2 and 3 was the North West London Hospitals NHS Trust.

Community contraceptive / family planning services

Services were provided by the following:

Westside Contraceptive Services provided contraceptive / family planning services at Levels 1, 2 and 3, and also provided STI screening and treatment at Levels 1 and 2. In 2008/09 this contract to deliver these services will be with Camden PCT.

Marie Stopes International provided vasectomies.

Other commissioned sexual health services

Brook London provided contraceptive / family planning services at Level 1.

Abortion services

Services were provided by the following:
Marie Stopes International. This was a cost per case contract. The provider offered the following services: consultation, procedures: medical up to 9 weeks, local anaesthetic up to 12 weeks, conscious sedation up to 14 weeks, general anaesthetic up to 14 weeks, conscious sedation 14+1 - 19 weeks CS, general anaesthetic 14+1 - 24 weeks. The contract also provided for contraception supply and fit (IUCD, Mirena, Implanon, Depo-Provera), sterilisation and vasectomy. In 2007/08 MSI provided 70% of the PCT’s abortions.

British Pregnancy Advisory Service (BPAS). This was a cost per case contract with an anticipated caseload. The provider offered the following services: counselling, medical procedures up to 9 weeks; 10-19 weeks; 20-24 weeks, surgical procedures local anaesthetic: up to 14 weeks, surgical procedures general Anaesthetic: up to 14 weeks; 15-19 weeks; 20-24 weeks. The contract also provided for chlamydia screening, contraception supply and fit (IUD, Mirena, Implanon) sterilisation and vasectomy. In 2007/08 BPAS provided 30% of the PCT’s abortions.

National Chlamydia Screening Programme

Collaborative commissioning arrangements were in place between Brent, Harrow and Hillingdon PCTs.

The Northwest London Hospital NHS Trust was commissioned to provide NCSP screens and treatment, and management of patients. Screening occurred in a number of sites including GPs, family planning, Brook, SHOC, pharmacies and outreach groups.

There was a LES in place with 34 pharmacies to provide NCSP screening.

Sexual health services provided by GPs outside of the GMS contract

The sole provider was Lonsdale GP Surgery, Kilburn.

Pharmacy based services

The PCT total spend on pharmacy based services in 2007/08 was funded out of the NCSP. 34 pharmacies signed up to undertake chlamydia screening.

Locally-commissioned HIV and primary STI prevention

Services were provided by the following:

Living Well worked with the gay community on the HIV positive self management programme.

Wembley Centre for Health and Care.

Brent PCT - Health Promotion undertook HIV and sexual health project work, training and coordination targeting mainly young people.

Complementary Health Trust provided therapies for HIV positive patients.

Sexual Health On Call (SHOC) Lonsdale Education Centre targeted 14-19 yrs olds for sexual health education, safe campaigns (young people, BME communities), condom distribution scheme (young people). They also provided education and training for GPs and other sexual health professionals and they developed resources/materials for health promotion on sexual health. In 2008/09 this provider will also promote and undertake Chlamydia screening.

African Child developed a training programme for school staff (e.g. teachers, nurses, counsellors) targeting under 19 year olds for sexual health promotion, 1:1 support, focus groups and support in accessing services.

NAZ Project provided HIV/STI awareness outreach for men who have sex with men (MSM) from South Asia and Middle Eastern communities.

Brent and Harrow Community Health Project delivered education programmes to individuals from Black & minority Ethnic Communities.
Service networks

The PCT engages with providers through the HIV Providers Forum, which includes a service users group and meets every quarter. The PCT’s HIV strategy group includes acute providers, PCT commissioners, authority representation and a general practitioner. There is also a Chlamydia Screening Steering Group. The Cervical Advisory Group includes representatives from family planning.

The PCT engages with service users via seven voluntary organisations.

Referral pathways

Referral pathways are defined and agreed between the services identified below:

NCSP and Contraceptive services
NCSP and Pharmacy
NCSP and GUM
Voluntary sector and NCSP

Clinical Network

The PCT’s providers are members of the North West London Sexual Health & HIV Network. The network is provider-led and there is commissioner involvement.

Commissioning & NEW Investment plans for 2008/09

The PCT has no specific plans to shift EXISTING activity out of an acute setting but is commissioning additional and new activity in a non acute setting.

New investment plans for 2008/09 include:

Funding a Young Persons Outreach Worker for Sexual Health, working with Family Planning Provider, to provide education health awareness to young people in Brent.

HIV Rapid Testing project delivered by a voluntary organisation, provided from three community-based locations, targeting people at risk of having HIV.
Bromley PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within Public Health. The Director of Public Health has overall responsibility. The Joint Director of Public Health and the Associate Director of Commissioning share responsibility for sexual health commissioning. Both have other responsibilities, including the broader public health issues and general commissioning.

Sexual health needs assessment

In 2003 the PCT undertook a comprehensive sexual health needs assessments. This is being revised in 2008. The PCT used findings from the 2003 needs assessment to identify gaps in sexual health provision and problems in access to GU services. Changes have been made to ensure better access to GU and the PCT has developed a LES for sexual health in general practice. The PCT is aiming to use the latest needs assessment as a basis for future commissioning.

Sexual health strategy

In 2006 the PCT published a sexual health strategy. This was informed by consultation with the voluntary sector, local GU services, community clinics, young people and the local authority. The strategy is used as a basis for commissioning. Gaps identified in services led to commissioning of increased GP services and commissioning of walk-in GU services. Once the 2008 needs assessment is completed, the sexual health strategy will be revised.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £2,472,312 which represented 0.61% of the total PCT budget.

Detailed service specifications were used for the following: sexual health in general practice/LES, family planning and GUM. These were developed locally.

GUM services

The hosted provider of GUM services at Levels 1, 2 and 3 was Bromley Hospitals NHS Trust.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Bromley PCT Provider Services. This provider was also commissioned to deliver STI screening and treatment at Levels 1 and 2. In 2008/09 this service will be reviewed following results of the comprehensive sexual health needs assessment.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

Services were provided by the following:

Marie Stopes International. This was a PbR contract with the provider offering the following services; medical up to 9 weeks, surgical up to 24 weeks, under 12 weeks local anaesthetic, up to 14 weeks conscious sedation and general anaesthetic. In 2007/08 MSI provided 75% of the PCT’s abortions.
**British Pregnancy Advisory Service.** This was a PbR contract with the provider offering the following services; medical up to 9 weeks, surgical procedures up to 24 weeks using both local and general anaesthetic. In 2007/08 BPAS provided 25% of the PCT’s abortions. In 2008/09 BPAS will take over coordination of abortions which in 2007/08 was undertaken by Bromley Hospital NHS Trust.

**Bromley Hospital NHS Trust** coordinated abortion services via an administration contract with the PCT. In 2008/09 BPAS will take over this service.

**National Chlamydia Screening Programme**

There were collaborative commissioning arrangements between 3 PCTs (Bexley, Bromley and Greenwich, with the latter acting as lead PCT). Greenwich PCT provides the service on behalf on Bromley PCT, but Bromley PCT takes an active part in the local organisation and delivery of services.

Screening was provided by pharmacists and GPs. Treatment and management was coordinated by the screening office, but provided by both pharmacists and GPs.

**Sexual health services provided by GPs outside of the GMS contract**

Services were provided at Levels 1 and 2 by 10 local practices. In 2008/09 the PCT will consider expanding these services.

**Pharmacy based services**

There was an enhanced contract for emergency hormonal contraception in place with four local pharmacies.

Chlamydia screening in pharmacies was funded by the NCSP budget. In 2008/09 this will be expanded to include 16-19 year olds, as well as 16 and under.

**Locally-commissioned HIV and primary STI prevention**

Services were provided by:

**Bromley PCT Provider Services** delivered an STI/HIV prevention service.

**CAB**

**The Junction.**

**Service networks**

The PCT engaged with providers via the PCT’s Sexual Health Strategy Group and the South East London Sector Group.

Service users were represented on the Sexual Health Strategy Group. The PCT also engaged with users through voluntary organisations.

**Referral pathways**

Referral pathways were defined and agreed between the services identified below:

- Primary care and GUM
- Contraceptive services and GUM
- GUM and contraceptive services
- Primary care and contraceptive services
- NCSP and contraceptive services
- NCSP and pharmacy

**Clinical network**

The PCT’s providers are members of the South East London Sexual Health Network.
Commissioning and NEW investment plans for 2008/09

The PCT has no new investment plans for 2008/09 and there are no plans to shift existing activity out of an acute setting.
Camden PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within commissioning. The Assistant Director of Strategic Planning and Joint Commissioning has overall responsibility. There is a Strategic Commissioner: HIV / Sexual Health whose post is split 80% (sexual health including HIV) and 20% (HIV social care). The Strategic Commissioner: HIV / Sexual Health provides the lead in joint commissioning arrangements for:
- GUM
- HIV voluntary organisations and services

Sexual health needs assessment

In 2006/07 the PCT undertook a comprehensive sexual health needs assessment. The needs assessment included demographic and epidemiological analysis, service mapping (commissioned and non-commissioned), recommendations from national sources plus evidence of effectiveness of interventions, stakeholder and public engagement. Areas covered included: SRE and young people’s sexual health, GUM and STI screening / treatment, contraception, abortion, HIV treatment and care, HIV social care and support, sexual health promotion and prevention.

The PCT used findings as a basis for commissioning. The needs assessment forms the basis for the sexual health and HIV strategy for Camden PCT.

Sexual health strategy

In 2007 the PCT published a sexual health strategy. Its vision is to improve the sexual health and well being of Camden residents and service users. It specifically aims to target young people and HIV positive individuals for better service provision, improving access and choice for GUM and other sexual health services to enable seamless service delivery. The action plan to deliver the vision and aims is reviewed annually.

The strategy was developed by stakeholders including: strategic commissioner, public health sexual health lead, health promotion workers, teenage pregnancy coordinator, GUM leads, community gynaecology and contraceptive leads and consultants, GP primary care lead, HIV patient lead, HIV service users, HIV consultants, young people, voluntary sector providers, local authority and umbrella organisation (VAC).

The PCT used the strategy to inform commissioning. It sets the four visions within which aims and action plans are developed. The action plans form the basis for commissioning intentions.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £12,610,277 which represented 2.99% of the total PCT budget.

Detailed service specifications were used for commissioning the following: GUM services, contraception and community gynaecology services, young people sexual health services (Brook Euston, Brandon Centre, THT Kilburn), abortion services, Chlamydia Screening Office, GP enhanced services, EHC pharmacy based services, all locally commissioned HIV and primary STI prevention services.

GUM services

Services were provided by the following:

**Mortimer Market Centre and Archway Sexual Health Clinic**, Camden PCT Provider Directorate at Levels 1, 2 and 3.

**The Marlborough Department**, Royal Free Hospital Hampstead, at Levels 1, 2 and 3.
Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Camden PCT Provider services.

In 2008/09 STI screening and treatment services will be developed in community contraception clinics.

Other commissioned sexual health services

Services were provided by the following:

Brook in Euston delivered Level 1 and 2 contraceptive / family planning services. In 2008/09 this service will be nurse-led and providing STI testing and treatment.

Brandon Centre delivered Level 1 and 2 contraceptive / family planning services and Level 1 and 2 STI screening and treatment services. In 2008/09 the Brandon Centre will be providing LARC.

THT at Kilburn Youth Centre, Terrence Higgins Trust, delivered Level 1 and 2 contraceptive / family planning services. In 2008/09, pending evaluation of service provision and outcomes, the budget for this service will be mainstreamed. It had been commissioned through the Local Area Agreement, healthier block.

Abortion services

Services were provided by the following:

Marie Stopes International. This contract was a cost and volume contract. The provider offered the following services; medical up to 9 weeks, surgical up to 24 weeks. In 2007/08 MSI provided 67% of the PCT’s abortions. In 2008/09 all activity provided by the Whittington Hospital in 2007/08 will transfer to MSI.

Royal Free Hospital. This contract agreement was an indicative volume agreement. The provider offered the following services; medical procedures up to 19 weeks, surgical procedures up to 13 weeks. In 2007/08 the Royal Free provided 15% of the PCT’s abortions.

University College Hospital

This contract was an indicative volume agreement. The provider offered surgical procedures up to 18 weeks. In 2007/08 University College Hospital provided 8% of the PCT’s abortions. In 2008/09 this service has been decommissioned and will be delivered by British Pregnancy Advisory Service.

Whittington Hospital

This contract was an indicative volume agreement. The provider offered the following services; medical up to 9 weeks, surgical up to 24 weeks. In 2007/08 MSI provided 9% of the PCT’s abortions. In 2008/09 this service has been decommissioned and activity will transfer to MSI.

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between Camden and Islington PCTs. Funding was on a 50:50 basis. The 2 PCTs held a single contract with the Chlamydia Screening Office.

The Chlamydia Screening Office coordinated all screening and management of positive patients and partner notification. No incentives/ remunerations were offered. Screening sites included: GPs, young peoples’ sexual health services, family planning clinics and other young peoples services. Treatment and management of positive patients occurred at screening sites facilities pending or at the GUM and young peoples’ sexual health clinics. All chlamydia positive patients are risk assessed over the phone and referred to GUM clinics if appropriate.

Sexual health services provided by GPs outside of the GMS contract

The PCT had a LES for sexual health services provided by GPs outside of the GMS contract in 2007/08. Services were provided by 32 practices at a variety of Level 1 and Level 1 and 2. In 2008/09 funding will be increased.
Pharmacy based services

The contract provided emergency hormonal contraception to Under 18s in 21 pharmacies across Camden. In 2008/09 chlamydia screening and treatment will be rolled out into pharmacies commencing August 2008.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

CLASH, (CPCT Provider Directorate) delivered a monthly outreach session targeting female sex workers in Soho, Kings Cross and Islington flats; twice weekly drop-in clinics for STI testing and treatment for sex workers; a weekly nurse led outreach session carried out in saunas in the Kings Cross, Euston and Islington areas; weekly street based outreach sessions with youth substance misuse organisations; weekly Hepatitis B vaccination services and 1-hour HIV testing for gay men and men who sell sex; condom sales for sex workers. CLASH work with sex workers, the homeless and all high risk and marginalised groups. The service was commissioned jointly by Camden, Islington and Westminster PCTs.

Good Sexual Health Team, (CPCT Provider Directorate): delivered sexual health training, condom distribution and health promotion to MSM and others. In 2008/09 the service is under review and the service plan will be based on its outcome.

African Communities Team, (CPCT Provider Directorate): delivered training and outreach with community organisations targeting African communities. In 2008/09 the service is under review and the service plan will be based on its outcome.

African Communities HIV Prevention Programme: consisting of 13 organisations funded to work with the PCT health promotion team to deliver HIV prevention services targeting African communities. In 2008/09 the commissioning arrangement will be shifted from grant giving to an outcome based commissioning process (change will be managed over a 2 year period).

Service networks

The PCT engaged with its providers via a Sexual Health Strategy Group which met quarterly. In addition there were regular provider / commissioner meetings.

The PCT engaged with service users via patient forums, liaison groups and providers service user reference groups.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Community pharmacy and GUM
Voluntary sector and GUM
GUM and contraceptive services
Primary care and contraceptive services
Community pharmacy and contraceptive services
Voluntary sector and contraceptive services
NCSP and contraceptive services
NCSP and pharmacy
NCSP and GUM
Voluntary sector and GUM

Clinical network

The PCT's providers are not members of a Clinical network.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting. New investment plans for 2008/09 include:
C Card, condom distribution for young people (Level 1).

NCSP

Brandon Centre, provision of LARC (Level 2).

Brook in Euston, STI screening.

Chlamydia screening and treatment in pharmacies.
City & Hackney PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health is shared between commissioning and public health, with public health sitting within the Commissioning Division. The Director of Public Health has overall responsibility. The Consultant Public Health leads on commissioning with 25 -30% of the post being dedicated to sexual health. Other responsibilities of the Consultant Public Health include teenage pregnancy, children and young people, emergency planning, flu pandemic, TB and infection control.

Sexual health needs assessment

In 2005 the PCT undertook a comprehensive sexual health needs assessment. In 2006 they also conducted a health equity audit of teenage pregnancy and young people’s sexual health. The PCT has used findings to inform local strategies and action plans and as a basis for commissioning.

Sexual health strategy

In 2008 the PCT published a sexual health strategy. The strategy was developed by stakeholders including: provider representatives - community and acute services, voluntary sector - Positive East, The Learning Trust, Hackney African Forum and the local authority. It is due for revision in 2011.

The PCT has used the strategy to inform commissioning. The strategy focuses service delivery on national and local priorities and identifies areas requiring additional local investment. The strategy action plan directly influences commissioning activity.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £6,838,499 which represented 1.67% of the total PCT budget.

GUM services

The hosted provider of GUM services was the Department of Sexual Health, Homerton University Hospital Trust, at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Community Sexual Health Services, City & Hackney PCT Provider Services. They also provided STI screening and treatment at Levels 1 and 2.

Other commissioned sexual health services

Services were provided by a number of providers and included SRE, condom distribution, teenage pregnancy and repeat conceptions. Providers included:

Brook London, Terrence Higgins Trust, Family Planning Association, Christopher Winter Project, The Learning Trust, Family Welfare Association, Immediate Theatre, Sky Partnership, City Zen, Hi8us, Homerton University Hospital Trust

Abortion services

The sole provider of services was the Women’s Outpatient Department, Homerton University Hospital Trust. This was a PbR contract.
National Chlamydia Screening Programme

Chlamydia screening is commissioned from community sexual health services, from primary care via a sexual health LES and from pharmacies via a LES. Remuneration was paid under the LES.

In 2008/09 there will be an SLA with Homerton University Hospital A & E Department and walk-in centres. Higher payments will be made to GPs with a bonus for hitting 17% screens.

Sexual health services provided by GPs outside of the GMS contract

The PCT had a primary care LES for sexual health services provided by GPs outside of the GMS contract in 2007/08. Services were provided by 41 of 46 practices across City & Hackney at Levels 1 and 2.

The PCT had a primary care LES for IUD / contraceptive implant with 29 practices providing services.

Pharmacy based services

The contract provided emergency hormonal contraception, chlamydia / gonorrhoea (dual NAATS) screening (for EHC clients plus partners), treatment for chlamydia and condom supply in 33 pharmacies across the PCT.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Terrence Higgins Trust and Barts and The London NHS Trust, which undertook outreach HIV testing in Chariots Sauna.

City & Hackney African Forum, delivered HIV prevention to the black African Community.

Service networks

The PCT engaged with providers via monthly Sexual Health Management Group meetings. Membership included: community sexual health services, acute service providers, teenage pregnancy coordinator, Chlamydia Screening Office, pharmacy, primary care commissioning, strategic commissioning, voluntary sector (including Positive East and City & Hackney African Forum).

The PCT engaged with service users via City & Hackney African Forum and Positive East, plus user questionnaires, mystery shopping exercises, community sexual health services user group established to test communication materials - all discussed at Sexual Health Management Group meetings and used to inform strategic direction and service improvements/changes.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Community pharmacy and GUM
Voluntary sector and GUM
GUM and contraceptive services
Primary care and contraceptive services
Community pharmacy and contraceptive services
NCSP and general practice
NCSP and pharmacy
NCSP and GUM

Clinical network

The PCT’s providers are members of the NE London HIV and Sexual Health Network. The clinical lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The clinical network is provider led and has commissioning involvement.
Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting but will be commissioning additional and new activity in a non acute setting. New investment plans for 2008/09 include:

Roll out of near patient HIV testing, to at risk groups. Providers will include the voluntary sector, community sexual health services, GUM.

Pan-London Clinicenta contract, nurse-led sexual health services at Levels 1 and 2, service specification currently in development.
Croydon PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, responsibility for sexual health is shared between commissioning and public health. The Director of Public Health has overall responsibility but commissioning leads are based within the Strategic Commissioning and Primary Care Commissioning Directorates. The Head of Acute Commissioning leads on sexual health commissioning and is the Coordinating Commissioner for the Mayday Hospital SLA. 5% of the post’s time is dedicated to sexual health.

Sexual health needs assessment

In early 2008 the PCT undertook a service targeted sexual health needs assessment focussed on contraceptive services. The PCT are planning a rapid needs assessment in late 2008 to compliment findings from the contraceptive needs assessment and the pan-London sexual health service mapping and needs assessment. In 2006/07 the PCT’s Annual Public Health Reports (APHR) set out priorities for sexual health.

The PCT has not used findings as a basis for commissioning. The recent service targeted needs assessment and the planned rapid needs assessment will be used in 2008/09 to inform development of a sexual health strategy and other related strategies eg primary care strategy.

Sexual health strategy

The PCT does not have a sexual health strategy. This will be developed in 2008/09.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £4,738,056 which represented 1.06% of the total PCT budget.

Detailed service specifications were used for the commissioning the following: GUM services, contraceptive services and abortion services.

GUM services

Services were provided by the following:

Mayday Hospital, at Levels 1, 2 and 3.

Kings College Hospital, at Levels 1, 2 and 3. The spend with this provider is an historical anomaly forming part of the PCT’s block contract with Kings.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Croydon PCT Provider services. This provider also undertook chlamydia screening. In 2008/09 the provider will receive increased funding for LARCs and to deliver chlamydia screening and treatment including in outreach settings.

Other commissioned sexual health services

Services were provided by the following:

4-Lad/4-All Sexual Health Advice Sessions, delivered Level 1 services. In 2008/09 chlamydia screening will be added to the service specification.

Talkbus Session Selhurst, provided drop-in support for young people at Level 1. In 2008/09 chlamydia screening will be added to the service specification.
Abortion services

Services were provided by the following:

**Marie Stopes International.** This contract was an indicative volume / indicative cost contract. The provider offered the following services; medical up to 9 weeks, local anaesthetic up to 12 weeks, conscious sedation up to 14 weeks and general anaesthetic up to 14 weeks, conscious sedation between 14 - 24 weeks. In 2008/09 there will be increased provision of contraception within the contract.

**Mayday Hospital.** This was a PbR contract. The provider offers the following services; surgical and medical abortions.

**National Chlamydia Screening Programme**

There were collaborative commissioning arrangements across South West London between Croydon, Kingston, Wandsworth, Sutton &and Merton and Richmond & Twickenham PCTs. The 5 PCTs hold a single contract with the Chlamydia Screening Office and a single laboratory contract which is managed via the SW London Collaborative Commissioning Group.

Croydon PCT contracts for delivery of screening tests. In 2007/08 there was a contract with Croydon PCT contraceptive service and LES contracts with GPs and pharmacists.

All treatment in 2007/08 was delivered via the Mayday Hospital GUM department. During 2008 a pathway will transfer treatment of positive patients to the PCT contraceptive services.

In 2008/09 the contract with pharmacists will be reviewed and aligned to the emergency hormonal contraception scheme. The PCT are also exploring the idea of including chlamydia screening as part of a more comprehensive LES for GPs, as well as developing a contract for screening via voluntary sector organisations.

**Sexual health services provided by GPs outside of the GMS contract**

Services were delivered by:

A NES contract for insertion of intra uterine devices (Level 2) with 39 practices.

A DES contract for implant insertion and removal (Level 2) which was part of the minor surgery DES with 10 practices.

**Pharmacy based services**

The LES contract provided emergency hormonal contraception (Level 1) to under 21 years olds in 9 pharmacies across Croydon.

**Locally-commissioned HIV and primary STI prevention**

The first four providers listed below are commissioned on behalf of South West London PCTs (Croydon, Kingston, Wandsworth, Sutton & Merton and Richmond & Twickenham). The South London HIV Partnership comprises joint commissioning arrangements between South East and South West London PCTs.

Spend by Croydon PCT contributed to the all of the subsequently detailed services.

Services were provided by:

**African Culture Promotions,** condom distribution scheme for businesses and social venues used by African communities in South West London.

**SHAKA “Badinnabed” project,** delivered sexual health information in community settings and via specific events, targeting young African / Afro Caribbean communities via detached work. In 2008/09 the service is due for re tender.
THT, Terrence Higgins Trust, delivered development work targeted at young gay men in order to support mainstream services in more effectively meeting the needs of the local gay population. In 2008/09 the service is due for re tender.

Family Support (Karibu), delivered family support services to families affected by HIV including social work services, family projects around education, disclosure, stigma, a summer play scheme, respite for carers, a fathers group and outreach to hard to reach communities. In 2008/09 the service is due for re tender.

South London HIV Partnership (comprises THT, The Positive Place, NAM, SLAM, NAW Solutions, Meganexus), delivered advice and advocacy, counselling, emotional and peer support for people with HIV living in south London.

Service networks

The PCT engaged with its providers via a Sexual Health and HIV Partnership Group which included commissioner and provider representatives. User / voluntary sector representation is currently being reviewed.

The PCT engaged with service users via surveys and consultation events linking to the children’s trust initiatives and through development of the teenage pregnancy strategy.

Referral pathways

Referral pathways were defined and agreed between the services identified below:

Community pharmacy and GUM
Voluntary sector and GUM
Community pharmacy and contraceptive services
NCSP and contraceptive services
NCSP and general practice
NCSP and pharmacy
NCSP and GUM
Voluntary sector and GUM

Clinical network

The PCT’s providers are members of SWAGNET. The clinical lead is Dr Paul Lister and the Network Manager is Janine Railton. SWAGNET is provider led but there is commissioner involvement. All South West London PCTs contribute to the costs of SWAGNET on a population prevalence basis as per SOPHID calculations.

Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting or to commission additional or new activity in a non acute setting. The only new investment plan for 2008/09 is:

Community Outreach Service, health promotion and Level 1 services targeting vulnerable young people.
Ealing PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within commissioning. The Director of Commissioning and Performance has overall responsibility. There is a Service Improvement Manager (Sexual Health and Specialist Services) who leads on sexual health commissioning. 50% of this post of dedicated to sexual health commissioning. The remaining 50% of the commissioner’s time is spent as the specialised commissioning lead for renal services.

Sexual health needs assessment

The PCT are currently undertaking a Joint Needs Assessment that covers health, social care and well-being. It is due for completion in June 08.

Sexual health strategy

The PCT do not have a sexual health strategy.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £3,133,499 which represented 0.64% of the total PCT budget.

Detailed service specifications were used for commissioning abortion services.

GUM services

The hosted provider of services was Ealing Hospital NHS Trust, at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Ealing PCT Provider services. The service also offered chlamydia screening.

Other commissioned sexual health services

The PCT did not commission any other sexual health services in 2007/08.

Abortion services

Services were provided by the following:

Marie Stopes International. The PCT has an annual fiscal year contract with MSI. MSI fee or tariff is based on a cost per case basis and the PCTs planned activity per procedure by year. The fee is inclusive of chlamydia screening and antibiotic treatment if required and an ultrasound scan to assess gestation. The contract also covers other procedures e.g., the provision from a choice of long-acting reversible contraception (LARC). The service is for all women registered with an Ealing GP and normally resident in the UK. It is coordinated through a booking service called One-Call and women can choose from one of four sites for their treatment. MSI can access and use the interpreting services provided by the local healthcare economy. The provider offers the following services; local anaesthetic up to 12 weeks, conscious sedation to 19 weeks, general anaesthetic to 24 weeks. In 2007/08 MSI provided 75% of the PCTs abortions. In 2008/09 MSI will work with the PCT to support distribution of chlamydia screening kits.

British Pregnancy Advisory Service. The PCT has an annual year fiscal year contract with BPAS. BPAS fee for tariff is based on a cost per case basis and the PCT’s planned activity per procedure by year. The fee is inclusive of chlamydia screening and antibiotic treatment, if required, and an ultrasound scan to assess gestation. Other procedures also undertaken by BPAS are chlamydia screening and provision of LARC. The
service is for all women registered with an Ealing GP or resident in Ealing. Women are referred to BPAS via the One-Call booking service which is managed by MSI. The provider offers the following services; medical procedures up to 19 weeks and medical induction from 19 - 24 weeks, surgical procedures manual vacuum aspiration to 10 weeks, local anaesthetic to 14 weeks, general anaesthetic to 24 weeks. In 2007/08 the BPAS provided 25% of the PCTs abortions.

**National Chlamydia Screening Programme**

The Chlamydia Screening Programme commenced in the PCT in February 2008 and is delivered via the PCT community contraception service and Marie Stopes International. In 2008/09 an incentive scheme is being rolled out to pharmacies and outreach workers are being employed.

**Sexual health services provided by GPs outside of the GMS contract**

The PCT had two LESs for sexual health services provided by GPs outside of the GMS contract in 2007/08. The first was with 42 practices throughout the PCT to fit intra uterine devices (Level 2). The second LES was with 4 practices to provide contraceptive implants (Level 2).

**Pharmacy based services**

A contract was in place to provide emergency hormonal contraception) in 19 pharmacies across Ealing.

**Locally-commissioned HIV and primary STI prevention**

Services were provided by:

- **West London Gay Men’s Project**, delivered condom and lubricant distribution scheme, outreach work, counselling and The Source Newsletter. The contract also managed the Your Zone project targeting young lesbian, gay and bisexual people. In 2008/09 the service will introduce a pilot of rapid HIV testing, a MSM clinic in the local GUM service and an education programme with primary care.

- **Ealing, Hammersmith & Fulham African Communities** delivered a number of interventions including the West London African Prevention Partnership that delivers the Love Safely Programme. Also the West London African Health forum and Service User Forum. In 2008/09 the service will pilot the Know4Sure project which is a community based rapid HIV testing programme.

- **Living Well**, delivered a positive self management programme, facilitator training, life coaching and counselling to people living with HIV.

- **West London Centre for Counselling**, delivered safer sex promotion, assessment and counselling to those affected by HIV/AIDS.

- **River House Trust**, delivered a range of practical and emotional support services and acted as a hosting service for a number of specialist support services for people affected by HIV.

- **Complementary Health Trust**, delivered complementary therapy services, acupuncture, shiatsu and aromatherapy to people living with HIV.

**Service networks**

The PCT engaged with providers via its Sexual Health Steering Group (Ealing-wide) which met bi-monthly. Membership included PCT commissioners, public health, health promotion, acute trust clinicians, family planning clinicians, chlamydia screening, teenage pregnancy, voluntary sector organisations and service users.

The PCT engaged with service users via representation of an HIV user group and a representative of the West London African Forum sat on its sexual health steering group.

**Referral pathways**

Referral pathways were defined and agreed between the services identified below:

- NCSP and contraceptive services
- NCSP and GUM
Clinical network

The PCT’s providers are members of the North West London Sexual Health Network. The network is provider led with Dr Gary Brook being Clinical Lead and Melanie Britton being Network Manager. There is commissioning involvement in the network. All of the 8 North West London PCTs contribute equally to support the network.

Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting but are commissioning new activity in a non acute setting. New investment plans for 2008/09 include:

Rapid HIV testing (Level 1).

Young People’s Sexual Health Work (Level 1).
Enfield PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, responsibility for sexual health is shared between commissioning and public health. The Director of Public Health has overall responsibility. The Assistant Director of Procurement and Acute Services leads on sexual health commissioning and provides the lead in joint commissioning arrangements for:
- GUM
- Abortions
5% of this post of dedicated to sexual health commissioning.

Sexual health needs assessment

In 2005 the PCT commissioned a rapid sexual health needs assessment. The PCT has not used findings as a basis for commissioning but the needs assessment does form the basis for the sexual health and HIV strategy for Enfield.

Sexual health strategy

In 2005 the PCT published a sexual health strategy which is now due for revision. A number of stakeholders were involved in its development including those from the voluntary sector and the Local Authority.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £2,450,648 which represented 0.66% of the total PCT budget.

The PCT did not commission against detailed service specifications.

GUM services

The hosted provider of services was Enfield PCT Provider Services which delivered services at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services was Enfield PCT Provider Services which delivered services at Levels 1, 2 and 3.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

Services were provided by the following:

Enfield PCT Provider Services. The provider offered medical procedures.

British Pregnancy Advisory Service. This was a cost and volume contract.

Royal Free Hospital. This was a PbR contract. The provider offered complex and surgical procedures.

King’s College Hospital managed complex procedures and patients with special needs.
National Chlamydia Screening Programme

Chlamydia screening was commissioned under a block contract with Enfield PCT Provider Services. There were collaborative commissioning arrangements between Haringey and Enfield PCTs. The Chlamydia Screening Office, based in Enfield PCT, provided screening and management of positives, partner notification, outreach and service development. No remunerations or incentives were offered.

Sexual health services provided by GPs outside of the GMS contract

Services were provided by a PMS, an NES and a LES and other contracts at 21 practices for IUCD fittings and checks.

Pharmacy based services

The contract provided emergency hormonal contraception at 10 pharmacies

Locally-commissioned HIV and primary STI prevention

The sole provider was Haringey PCT.

Service networks

The PCT engaged with providers via the London Sexual Health Programme and through North Central Sector commissioners.

The PCT undertook a formal consultation process in 2006/07. Informally it engaged with service users via questionnaires and service feedback.

Referral pathways

Referral pathways were defined and agreed between the services identified below:

Voluntary sector and NCSP

Clinical network

The PCT's providers are not members of a clinical network.

Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting but is commissioning new activity in a non acute setting. New investment plans for 2008/09 include:

Outreach Contraception Services.
Greenwich PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within the Service and Systems Development Directorate. The Director of Service and Systems Development has overall responsibility. The Sexual Health and HIV Development Manager leads sexual health commissioning and provides the lead in joint commissioning arrangements for the National Chlamydia Screening Programme across three PCTs.

Sexual health needs assessment

The PCT has commissioned a rapid service targeted sexual health needs assessment focussing on young people. This work is due for completion in August 2008. The PCT plans to use the findings to inform development of targeted initiatives and services for young people.

Sexual health strategy

In 2006 the PCT published a sexual health strategy. The strategy was developed by stakeholders including: Sexual Health Strategy Group members, the local authority, primary care, voluntary sector and the acute trust.

The PCT has used the strategy to inform commissioning. The Action Plan of the strategy outlines services and initiatives that need to be commissioned or developed. The strategy is due for revision in 2008.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £3,468,800 which represented 0.93% of the total PCT budget.

Detailed service specifications were used for commissioning the following services: contraception, Metro Centre Pit Stop, GUM, NCSP, AHEAD Start Clinic.

GUM services

The hosted provider of services was Trafalgar Clinic, Queen Elizabeth Hospital, at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Greenwich PCT Provider Services (Market Street Health Centre). This service also provided STI screening and treatment at Levels 1 and 2.

Other commissioned sexual health services

Services were provided by:

Metro Centre Pit Stop Clinic delivered Level 1 and 2 STI testing and treatment.

Metro Centre AHEAD Start Clinic delivered Level 1 and 2 STI testing and treatment.

Abortion services

Services were provided by the following:

Alexandra Clinic, Queen Elizabeth Hospital. This contract was a PbR contract. The provider offered the following services; medical and surgical terminations up to 14 weeks.
British Pregnancy Advisory Service. This contract agreement was an indicative volume agreement by tariff. The provider offered medical and surgical procedures up to 24 weeks.

Marie Stopes International. This contract was an indicative volume agreement by tariff. The provider offered medical and surgical procedures up to 20 weeks.

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between Greenwich, Bexley and Bromley PCTs with Greenwich PCT acting as the lead commissioner. Greenwich PCT Provider Services were the commissioned provider of services. There were arrangements with community pharmacies for both screening and treatment and management of patients.

Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission any sexual health services provided by GPs outside of the GMS contract.

Pharmacy based services

The contract provided emergency hormonal contraception in 22 pharmacies across Greenwich.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Metro Centre, which delivered HIV prevention work with gay men, outreach, counselling and a rapid HIV testing service.

AHEAD, which delivered HIV prevention work with Africans, outreach, counselling and a rapid HIV testing service.

Service networks

The PCT engaged with providers via the Greenwich Sexual Health Strategy Group and Greenwich Sexual Health Board. The groups met quarterly and membership included PCT managers, service leads, the local authority and the voluntary sector.

The PCT required service user involvement in all the SLAs it had with providers. It also undertook assessments of user involvement.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Community pharmacy and GUM
Voluntary sector and GUM
GUM and contraceptive services
Primary care and contraceptive services
Community pharmacy and contraceptive services
Voluntary sector and contraceptive services
NCSP and contraceptive services
NCSP and general practice
NCSP and pharmacy
NCSP and GUM
Voluntary sector and NCSP

Clinical network

The PCT’s providers are not members of a clinical network.
Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting. New investment plans for 2008/09 include:

**Sexual Health Website for Greenwich**

**Sexual Health LES for GPs**, for delivery of Level 1 services
General information

Within the PCT structure, sexual health sits within commissioning. The Director of Commissioning has overall responsibility. The Commissioning Manager (Sexual Health and HIV) leads on sexual health commissioning. This post is dedicated to sexual health and HIV, with additional responsibilities that include:

- Lead Commissioner for joint voluntary sector HIV support services projects (funded by Hammersmith & Fulham PCT and the London Borough of Hammersmith & Fulham)
- Coordinating Commissioner for contraceptive services across Kensington & Chelsea PCT, Westminster PCT and Hammersmith & Fulham PCT

Sexual health needs assessment

In 2007 the PCT undertook a service targeted needs assessment focussing on HIV and men who have sex with men. This was undertaken as rates of infection were continuing to increase in Hammersmith & Fulham, there was a changing profile of people affected and services were no longer meeting need. The PCT wanted to consider existing service configuration in the borough to inform unmet need and future commissioning that complemented pan-London HIV prevention programmes.

The PCT has used findings as a basis for commissioning. Key stakeholders were engaged in developing service specifications. Two tender processes were initiated; one for HIV support services and the other for health promotion for men who have sex with men. Organisations were invited to tender and the contracts were awarded for 2008/09.

The PCT are planning to commission a comprehensive sexual health needs assessment by the end of 2008.

Sexual health strategy

In 2005 the PCT published a sexual health strategy. This was informed by members of the Sexual Health Strategy Group which included GUM clinicians, local authority representation, voluntary sector providers, PCT Health Improvement Managers, community representatives, service user representatives, teenage pregnancy coordinator and a general practitioner. In addition, the following were also consulted; HIV Service User Forum, Voluntary Sector Providers Forum, the Gay Men’s Project and the African Sexual Health and HIV Providers Forum.

The strategy has been revised and the 2008-12 sexual health strategy has been drafted and is out for consultation.

The PCT has used the strategy to inform commissioning by the outlining key priority areas which are likely to have maximum impact. Each of these areas has key initiatives for improvement with a detailed 5 year financial plan.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £4,463,482, which represented 1.54% of the total PCT budget.

Detailed service specifications were used for the following services: GUM, contraception, abortion, HIV support, men who have sex with men health promotion, HIV prevention, chlamydia screening. These were developed jointly with service providers. Service level agreements are signed off on a yearly basis and for 2007/08 were approved by the end of March 2007.
GUM services

The hosted provider of GUM services at Levels 1, 2 and 3 was the West London Centre for Sexual Health (Chelsea & Westminster Hospital NHS Foundation Trust) provided at Charing Cross Hospital (part of Imperial College Healthcare NHS Trust). This provider was also commissioned to deliver contraceptive services at Levels 1 and 2. In 2008/09 this provider will deliver outreach at an increased number of venues. A review of contraceptive services in 2008/09 will inform the future provision of Level 1-3 contraceptive services in GUM clinics.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Westside Contraceptive Services, Westminster PCT. This provider was also commissioned to deliver STI screening and treatment at Levels 1 and 2. In 2008/09 there will be a review of all contraceptive services which will inform ‘in year’ changes to the contract.

Other commissioned sexual health services

Services were provided by the following:

The Young People’s Service, Teenage Pregnancy Unit, London Borough of Hammersmith & Fulham delivered Level 1 contraceptive / family planning services.

Streetwise Youth, Terrence Higgins Trust delivered Level 1 contraceptive / family planning services and Level 1 STI screening and treatment services.

Image in Action delivered Level 1 contraceptive / family planning services and Level 1 STI screening and treatment services.

Abortion services

Services were provided by the following:

Marie Stopes International. This contract was a cost/case agreement. The provider invoiced the PCT on a monthly basis for actual activity. The provider offered the following services; consultation services, medical procedures up to 24 weeks, surgical procedures up to 14 weeks with local anaesthetic and up to 24 weeks with general anaesthetic, counselling and medical screening for terminations, sterilisation, post abortion services, chlamydia screening and contraception services. In 2008/09 the service specification will also include the introduction of vasectomies and provision of LARC.

British Pregnancy Advisory Service. This contract was a cost/case agreement. The provider invoiced the PCT on a monthly basis for actual activity. The provider offered the following services; medical procedures up to 24 weeks, surgical procedures up to 14 weeks with local anaesthetic and up to 24 weeks with general anaesthetic, counselling and medical screening for terminations, vasectomy and sterilisation, post abortion services, chlamydia screening and contraception services. In 2008/09 the service specification will include the provision of LARC.

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between 3 PCTs (Westminster, Kensington & Chelsea and Hammersmith & Fulham). The 3 PCTs held a single contract with the Chlamydia Screening Office.

Until November 2007 Chelsea & Westminster Hospital hosted the programme. In December 2007, the programme was transferred to Westside Contraceptive Services (WCS). WCS has taken on the management of the Chlamydia Screening Programme for the 3 PCT consortium (Westminster PCT, Kensington & Chelsea PCT and Hammersmith & Fulham PCT) and is commissioned for NCSP screens and the treatment and management of patients and partners.

In 2008/09 chlamydia screening will be rolled out to primary care providers and other identified community sites. Details and specifications of incentives / remunerations will be agreed during the course of 2008/09.
Sexual health services provided by GPs outside of the GMS contract

The PCT had no contracts for sexual health services provided by GPs outside of the GMS contract in 2007/08.

Pharmacy based services

This was a LES contract provided under a partnership between Westside Contraceptive Services and pharmacies to provide contraceptive services to young people. It mainly provided contraception information and services. Not all the pharmacies in the PCT were part of this partnership. In 2008/09 chlamydia screening will be rolled out into pharmacies.

Locally-commissioned HIV and primary STI prevention

The following services were commissioned:

HIV support services were delivered by a number of providers, including River House, West London Centre for Counselling, Terrence Higgins Trust and the North London Project. These all provided support services for HIV positive people and people affected by HIV/AIDS. A review of HIV support services in 2007/08 resulted in a tender process. Organisations were invited to tender for 1-5 service components and contracts were awarded to successful organisations. These will take effect in 2008/09.

Living Well provided positive self management programmes for HIV positive people. In 2008/09 the project will pilot sexual health self management programmes.

African Communities Project delivered primary and secondary prevention services to people living with and affected by HIV/AIDS. In 2008/09 this contract will have a specific primary prevention focus.

West London Gay Men's Project delivered health promotion and outreach work for gay men and men who have sex with men, and for men living with and affected by HIV. It also provided a rapid HIV-testing service. In 2008/09 commissioned services from this provider will complement pan-London Programmes.

NAZ Project, London provided HIV/STI awareness outreach for men who have sex with men (MSM) from South Asia and Middle Eastern communities. The also provided outreach in venues accessed by MSM, condom distribution, support groups and training. In 2008/09 the project will work in partnership with The West London Gay Men's HIV Prevention Project.

Complementary Health Trust provided complementary health therapies to HIV positive people. The service closed down in 2007.

Service networks

The PCT had a Sexual Health Strategy Group. Membership included GUM clinicians, local authority representation, Voluntary Sector providers, PCT Health Improvement Managers, community representatives, service user representatives, teenage pregnancy coordinator and a general practitioner. This group met on a bi-monthly basis. The Sexual Health and HIV Providers Forum is a new group due to commence in June 2008.

The PCT had an HIV Service User Forum. The Chair on the service user forum sat on the Sexual Health Strategy Group and on other sexual Health panels within the PCT. The Forum was involved in service reviews, development of generic HIV service specifications, consultations and needs assessments. The Sexual Health and HIV Commissioner attended the Forum meetings and held regular meetings with the Chair of the Forum on user views and feedback on services, all of which informed service development and provision of services.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Community pharmacy and GUM
Primary care and contraceptive services
Community pharmacy and contraceptive services
NCSP and contraceptive services
Clinical network

The PCT’s providers are members of the North West London Sexual Health Network. The network lead is Dr Gary Brook and the Network Manager is Melanie Britton. The PCT contributes to the funding of the network, along with the other North West London PCTs.

The network is provider-led and there is commissioner involvement.

Commissioning and NEW investment plans for 2008/09

New investment plans for 2008/09 include:

**Chelsea & Westminster Hospital** to provide sexual health training for primary care providers to deliver Level 1 and 2 services.

**Sexual Health Well-being Centre.** In 2008/09 the PCT will undertake a mapping and consultation exercise to establish how sexual health services will be delivered in the well-being centre and where the most appropriate setting would be.

The PCT has no specific plans to shift existing activity out of an acute setting but it does plan to commission young persons sexual health outreach clinics and HIV/STI outreach clinics as part of the GUM contract. The PCT is looking at developing hub and spoke Levels 1, 2 and 3 services. In 2008, a project worker will be recruited to establish how the hub and spoke will work and to identify clear referral pathways to and from the hub.

Additional investment in sexual health services is subject to funding approval by the Planning and Strategy Group scheduled to meet in July 2008.
Haringey PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within public health. The Director of Public Health has overall responsibility. A consultant in public health (Head of Inequalities and Partnerships) leads on sexual health commissioning. 10% of this post is dedicated to sexual health. Other responsibilities include health inequalities, well-being agenda and child immunisation.

Sexual health needs assessment

The PCT has not undertaken a needs assessment that focussed on, or included, sexual health.

Sexual health strategy

In 2005 the PCT published a sexual health strategy. The following stakeholders were involved in its development; family planning, abortion service, GUM, HIV services, psychosexual services, Primary Care Directorate, GPs, Pharmacy Department, teenage pregnancy Team, Health Improvement Department, the local authority, LEA, Haringey TPCT commissioning, school nursing service, NHS walk-In centre and voluntary groups.

The strategy set out a framework for delivery of sexual health services in Haringey, a vision, guiding principles and a model for an integrated sexual health network. A 3 year action plan was developed that supported commissioning and service development. The strategy is due for revision in 2008.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £3,375,864 which represented 0.88% of the total PCT budget.

GUM services

The hosted provider was St Ann’s Sexual Health Centre (SASHC), St Ann’s Hospital, which delivered services at Levels 1, 2 and 3. In 2008/09 SASHC will support the development of integrated services at PolyClinics.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was St Ann’s Hospital (sexual health, contraception and reproductive health services).

Other commissioned sexual health services

SHOC (Sexual Health on Call) provided a sexual health service (Levels 1 and 2) to women who sell sex. This was managed by the GU service under the contract with St Ann’s Hospital.

Abortion services

Services were provided by the following:

British Pregnancy Advisory Service (BPAS). This contract was based on indicative volume (number of procedures).

St Ann’s Hospital (sexual health, contraception and reproductive health services). This contract was for managing referrals only.
National Chlamydia Screening Programme

There were collaborative commissioning arrangements between Haringey and Enfield PCTs. The Chlamydia Screening Office, based in Enfield PCT, provided screening and management of positives, partner notification, outreach and service development. No remunerations or incentives were offered.

Sexual health services provided by GPs outside of the GMS contract

2 GP practices delivered Level 1 and 2 services with NES contracts.

Pharmacy based services

A contract provided emergency hormonal contraception in 20 pharmacies across Haringey.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Pan African and Caribbean Sexual Health (PACSH) delivered community support services for black African and other BME groups.

Pan African and Caribbean Sexual Health (PACSH) delivered a service for black African and other BME pregnant women newly diagnosed HIV positive.

Pan African and Caribbean Sexual Health (PACSH) delivered a community condom distribution scheme aimed at black African and other BME groups.

Pan African and Caribbean Sexual Health (PACSH) delivered an HIV Test Awareness and Test Promotion scheme aimed at black African and other BME groups.

Pan African and Caribbean Sexual Health (PACSH) delivered an HIV Champion’s Programme aimed at black African and other BME groups.

Service networks

The PCT engaged with providers via the Haringey Sexual Health Partnership Board which met quarterly. Membership included clinicians (HIV, sexual health and family planning), public health, primary care, community nursing, young peoples services, teenage pregnancy, local authority (including social services), education and voluntary sector and service users.

The PCT engaged with service users via the Sexual Health Partnership Board, which had service user representation. Service users were also involved in the HIV prevention tendering process. Their views were obtained via service reviews. GUM and family planning services carried out regular patient surveys.

Referral pathways

There were no referral pathways defined or agreed between services.

Clinical network

The PCT's providers are not members of a clinical network.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting. The PCT is investing in developing services in primary care that will divert activity from GUM and community family planning services within a managed service network framework.

New investment plans for 2008/09 include:

GUM to provide an integrated community sexual health service for young women at Levels 1, 2 and 3.
GPs, A&E, and walk-in centres to increase access to HIV testing for black African and other BME groups.

GUM to mainstream and develop services for young people at Levels 1 and 2.

GPs to develop Level 1 services in primary care aimed at sexually active people.
Harrow PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within public health. The Director of Public Health has overall responsibility. The Choosing Health Lead for Obesity and Sexual Health has responsibility for sexual health commissioning, which comprises 15% of the post. This is supported by a Commissioning Manager who has responsibility for negotiating the contracts with the GUM service and contraceptive services with North West London Hospitals Trust. Approximately 5% of the Commissioning Manager’s post is devoted to sexual health.

Sexual health needs assessment

The PCT has commissioned a comprehensive sexual health needs assessment which is due for completion in July 2008. This will build on a service targeted needs undertaken in 2004/05.

The PCT used findings from the service targeted needs assessment to redesign the voluntary services it commissioned. Once completed the comprehensive sexual health needs assessment will inform the PCTs sexual health strategy and inform commissioning.

Sexual health strategy

In 2005 the PCT published a sexual health strategy which is currently being revised. Completion is expected in June 2008. The strategy identifies priorities, service gaps and areas requiring investment. Once the comprehensive needs assessment is complete it will be incorporated into the revised sexual health strategy and shape future commissioning intentions.

The revised strategy is being developed by stakeholders including: service providers, service users, community representatives who are not service users and a range of others.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services (excluding specialised HIV treatment and care) was £1,415.104 which represented 0.54% of the total PCT budget.

Detailed service specifications were used for the commissioning the following: Clinic in a Box, SHIP, Living Well and Complementary Health Trust. These specifications have been developed on the basis of local information, needs assessment and with the support of Sexual Health Strategy Group members.

GUM services

The sole provider of services was North West London Hospitals Trust, Northwick Park Hospital, at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 and STI screening and treatment at Level 1 was North West London Hospitals Trust, Contraception and Family Planning Service. In 2008/09 this contract is being renegotiated.

Other commissioned sexual health services

Services were provided by the following:

Clinic in a Box, North West London Hospitals Trust, delivered Level 1 contraceptive / family planning and Level 1 STI testing and treatment to young people in Harrow.

Brook, London, delivered Level 1 contraceptive / family planning and Level 1 STI testing and treatment to young people in Harrow.
Abortion services

Services were provided by the following:

**Marie Stopes International.** This was a cost per case contract. The provider offered the following services; medical up to 9 weeks, surgical up to 24 weeks, under 12 weeks local anaesthetic, up to 17 weeks conscious sedation and general anaesthetic. In 2007/08 MSI provided 77% of the PCTs abortions.

**British Pregnancy Advisory Service.** This contract was an indicative volume agreement. The provider offered the following services; medical up to 9 weeks, surgical procedures up to 24 weeks using both local and general anaesthetic. In 2007/08 BPAS provided 23% of the PCTs abortions.

**National Chlamydia Screening Programme**

There were collaborative commissioning arrangements between Brent and Harrow PCTs with a single provider - **North West London Hospitals Trust.** The trust was commissioned to manage all treatment of patients and partners. GPs and the family planning service also treat patients but are not commissioned to do so. A trial of remunerating GPs to screen was undertaken for 1 month, GPs were paid for every screen undertaken. In 2008/09 pharmacists will be commissioned to undertake chlamydia screening.

**Sexual health services provided by GPs outside of the GMS contract**

**St Peters Medical Centre** was the only GP practice to include sexual health within the PMS.

**Pharmacy based services**

A contract was launched in early 2008 to provide free emergency hormonal contraception to Under 19s in 15 pharmacies across Harrow. In 2008/09 the PCT are developing a LES for chlamydia screening to be rolled out into pharmacies.

**Locally-commissioned HIV and primary STI prevention**

Services were provided by:

**Condom and pregnancy testing kit distribution,** **Public health team within the PCT** targeting young people and vulnerable adults.

**Voluntary service sexual health prevention,** delivered sexual health and HIV prevention services to high risk groups.

**Service networks**

The PCT engaged with providers via a quarterly Strategy Group meeting where all providers attend. In addition there were a number of sub group meetings including chlamydia screening and the teenage pregnancy board.

The PCT engaged with service users via a voluntary service which was commissioned to engage with those who do not traditionally access services. It also utilised patient forums, liaison groups and providers service user reference groups.

**Referral pathways**

Referral pathways were defined and agreed between the services identified below:

- Primary care and GUM
- Contraceptive services and GUM
- Voluntary sector and GUM
- GUM and contraceptive services
- Primary care and contraceptive services
- Community pharmacy and contraceptive services
- NCSP and contraceptive services
- NCSP and general practice
Clinical network

The PCT's providers are members of the North West London Clinical Network. The network is provider led with Dr Gary Brook being Clinical Lead and Melanie Britton being Network Manager. There is commissioning involvement in the network. All of the 8 North West London PCTs contribute equally to support the network.

Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting. New investment plans for 2008/09 include:

**Provision of standardised SRE in schools across Harrow**, this will be provided by the Contraceptive and Family Planning Services.

**Chlamydia screening and treatment in pharmacies.**
Havering PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within public health. The Director of Public Health has overall responsibility. The Senior Public Health Commissioner leads on sexual health commissioning. This post is also responsible for joint commissioning across three PCTs for maternity services and for commissioning smoking cessation services. Sexual health commissioning accounts for 50% of the post holder’s role.

Sexual health needs assessment

In 2004 the PCT undertook a rapid health impact assessment, the results of which led to a further review of sexual health services across Havering and Barking & Dagenham PCTs in 2005. In addition a needs assessment was commissioned as part of the PCT’s focus on service development. The results of the review informed commissioning intentions and development of an integrated sexual health service specification for Levels 1, 2 and 3 across Havering, Redbridge and Barking & Dagenham PCTs.

The PCT has used findings as a basis for a tendering process for an integrated sexual health service across the three PCTs.

Sexual health strategy

The PCT does not have a sexual health strategy.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £1,274,811 which represented 0.38% of the total PCT budget.

A detailed service specification for an integrated sexual health service providing Levels 1, 2 and 3 was developed and agreed across the three PCTs (Havering, Redbridge and Barking and Dagenham) in 2008. It formed the specification for tender of the service.

GUM services

The hosted provider of services was Barking, Havering and Redbridge Hospitals Trust, Queens Hospital, at Levels 1, 2 and 3. In 2008/09 this service will become part of the integrated sexual health service.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1 and 2 was Havering PCT Provider services. In 2008/09 this service will become part of the integrated sexual health service.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

Services were provided by the following:

Marie Stopes International. This was a PbR contract with fixed costs per procedure uncapped by volume. The provider offered the following services; medical up to 9 weeks, local anaesthetic up to 12 weeks, conscious sedation up to 12 weeks, general anaesthetic up to 24 weeks. In 2008/09 this contract is under review.

Terminations that could not be undertaken by Marie Stopes for health reasons were referred to Kings College Hospital.
National Chlamydia Screening Programme

There were collaborative commissioning arrangements between Havering and Barking & Dagenham PCTs.

The Terrence Higgins Trust was the commissioned provider of services. Screens captured as part of the adjoining boroughs’ chlamydia screening programme formed part of the collaborative arrangement. THT managed all aspects of these screens from the adjoining borough. In 2008/09 Havering PCT are testing the market for a new provider and plan to roll out a new NCSP contract.

Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission any sexual health services provided by GPs outside of the GMS contract.

Pharmacy based services

In 2007/08 the PCT did not commission any pharmacy based services.

Locally-commissioned HIV and primary STI prevention

The sole provider of services was Positive East (and Widows and Orphans), HIV Prevention and Wellbeing Service, which delivered services targeted African communities and gay men living with and affected by HIV.

Service networks

The PCT engaged with providers via regular meetings.

The PCT engaged with service users via a consultation process as part of the tendering of services. The young peoples’ parliament (part of youth services) undertook mystery shopping exercises of sexual health services. User involvement has been built into the new sexual health service specification.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Voluntary sector and GUM
GUM and contraceptive services
Primary care and contraceptive services

Clinical network

The PCT’s providers are members of the North East London HIV and Sexual Health Network. The Clinical Lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The clinical network is provider led and there is commissioner involvement.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting as a result of the tendering process. In addition to this new investment plans for 2008/09 include:

Targeted Contraceptive services for young people. The C card scheme and additional LARC are being considered. Providers yet to be established.

NCSP Additional investment.
The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within commissioning. The Executive Director of In Hospital Commissioning has overall responsibility. There is a Commissioning and Service Development Manager whose post is split 25% to sexual health. Other responsibilities include maternity, independent contracts and acute commissioning. This post also acts as the lead coordinating commissioner for pan-London Helicopter Emergency Medical Services for the 31 London PCTs.

Sexual health needs assessment

The PCT has not undertaken a sexual health needs assessment.

Sexual health strategy

In 2005/06 the PCT published a sexual health strategy with a three year action plan which is now due for review. The PCT plan to recruit a permanent sexual health commissioner whose role it will be to lead the review of the Hillingdon sexual health strategy.

The strategy was developed by stakeholders including: the local Sexual Health Strategy Group, Healthy Hillingdon (part of the local authority), acute trust (clinicians and managers), teenage pregnancy, young people’s service including Brook and KISS, contraceptive service clinicians and voluntary sector representatives including the Hillingdon AIDS Response Trust.

The PCT has used the strategy to inform commissioning. The three year action plan reflected key national priorities including the GUM access target, rolling out the NCSP in 2008/09 and increasing and improving uptake of rapid HIV testing.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £2,106,396 which represented 0.65% of the total PCT budget.

Detailed service specifications were not used for commissioning in 2007/08 but the London Sexual Health Programme templates were used for 2008/09.

GUM services

The hosted provider of services was the Tudor Centre, Hillingdon Hospital, at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 and STI screening and treatment at Level 1 was Hillingdon PCT Provider Services at Uxbridge Health Centre. This service also provides condoms to GP practices, outreach services in schools and young people drop in centres.

Other commissioned sexual health services

Services were provided by Brook, London, which delivered Level 1 and 2 contraceptive / family planning services and Level 1 STI screening and treatment.

Abortion services

The sole provider of services was Marie Stopes International. This contract was a cost per case contract - not capped. The provider offered the following services; medical up to 9 weeks, local anaesthetic up to 12 weeks, conscious sedation up to 19 weeks, general anaesthetic to 24 weeks. In 2008/09 the contract will remain cost per case.
National Chlamydia Screening Programme

The PCT spend in 2007/08 represented start-up costs for NCSP screens in Feb / March 2008 prior to full roll out of the programme in April 2008.

There were collaborative commissioning arrangements between Hillingdon, Brent and Harrow PCTs. Northwick Park Hospital were the service provider. They managed the programme and treated patients and partners. Other screening sites included family planning clinics, pharmacies, Clinic in a Box, Brook, Uxbridge College, Brunel University and RAF Hillingdon.

In 2008/09 the contract value will include funding to establish pharmacy based screening. Treatment will not be part of this. Screening will also be undertaken by Marie Stopes International.

Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission sexual health services provided by GPs outside of the GMS contract.

Pharmacy based services

The contract provided emergency hormonal contraception for under 18’s in 6 pharmacies across Hillingdon.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Healthy Hillingdon, delivered health promotion, SRE, peer learning programmes.

Hart (Hillingdon Aids Response Trust), delivered a range of services to support supports needs of people living with HIV and those affected by HIV.

Service networks

The PCT engaged with providers via formal quarterly meetings with the multi-disciplinary Sexual Health Strategy Group and meetings with individual providers.

The PCT engaged with service users via audit, surveys and mystery shopping exercises via service providers.

Referral pathways

Referral pathways were defined and agreed between the services identified below:

Primary care and GUM
Contraceptive services and GUM
Community pharmacy and GUM
Voluntary sector and GUM
GUM and contraceptive services
Primary care and contraceptive services
Community pharmacy and contraceptive services
Voluntary sector and contraceptive services
NCSP and contraceptive services
NCSP and pharmacy
NCSP and GUM
Voluntary sector and NCSP

Clinical network

The PCT's providers are members of the North West London Clinical Network. The network is provider led with Dr Gary Brook being Clinical Lead and Melanie Britton being Network Manager. There is commissioning involvement in the network. All of the 8 North West London PCTs contribute equally to support the network.
Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting. New investment plans for 2008/09 include:

**NCSP** Full roll out including remuneration for pharmacists and advertising.

**Young Peoples Outreach**, at Level 1 targeting pharmacies and young peoples drop in centres.
General information

Within the PCT structure, sexual health sits within commissioning. The Director of Healthcare Procurement has overall responsibility. There is a Senior Commissioning Manager for Children and Families and an Assistant Commissioning Manager (Acute) who share responsibility for sexual health commissioning. The Senior Commissioning Manager for Children and Families also commissions prison health care. Approximately 10% of this post is devoted to sexual health. The Assistant Commissioning Manager (Acute) also commissions prison health care but 50% of this post is devoted to sexual health commissioning.

Sexual health needs assessment

In 2007 the PCT undertook a service targeted sexual health needs assessment. The needs assessment supported the business case for service redesign.

The PCT has used findings as a basis for commissioning Level 1 and 2 services targeting MSM. It has also informed areas needing investment including primary care and contraception / family planning.

Sexual health strategy

In 2007 the PCT published a sexual health strategy. The strategy was developed by stakeholders including: clinicians from the acute trust and primary care, voluntary sector partners and the local authority. Ongoing review and monitoring of the strategy is undertaken by the PCT Sexual Health Strategy / Modernisation Group.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £2,757,181 which represented 0.88% of the total PCT budget.

Detailed service specifications were not used for the commissioning of services.

GUM services

The hosted provider of services was West Middlesex University Hospital, at Levels 1, 2 and 3. The provider also delivered contraception / family planning services at Levels 1, 2 and 3.

In 2008/09 the PCT expect a reduction in activity with this provider as capacity within community family planning clinics increases and primary care services commence.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1 and 2 was Hounslow PCT Provider Services (Community Family Planning Clinics, Isleworth Health Centre). In 2008/09 the provider will undertake chlamydia screening and asymptomatic STI screening.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

Services were provided by the following:

British Pregnancy Advisory Service. This was a ‘spot purchasing’ contract, where the provider was paid upon issue of an invoice. The provider offered the following services; counselling, medical up to 9 weeks, surgical up to 24 weeks. The provider also fitted IUDs.
Marie Stopes International. This was a ‘spot purchasing’ contract, where the provider was paid upon issue of an invoice. The provider offered the following services; medical up to 9 weeks, local anaesthetic up to 12 weeks, conscious sedation to 19 weeks, general anaesthetic up to 24 weeks. The provider also offered contraception including all LARC methods and sterilization.

National Chlamydia Screening Programme

The NCSP was hosted by the family planning service.

Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission sexual health services provided by GPs outside of the GMS contract.

Pharmacy based services

In 2007/08 the PCT did not commission any pharmacy based services.

Locally-commissioned HIV and primary STI prevention

In 2007/08 the PCT did not commission any locally commissioned HIV and primary STI prevention services.

Service networks

The PCT has a Sexual Health Strategy Group which meets on a monthly basis.

The PCT engaged with service users via the EHH (Ealing, Hammersmith and Hounslow) HIV Forum. The PCT is looking to increase engagement with other voluntary sector groups.

Referral pathways

The PCT have no defined and agreed referral pathways between services.

Clinical network

The PCT’s providers are members of the North West London Clinical Network. The network is provider led with Dr Gary Brook being Clinical Lead and Melanie Britton being Network Manager. There is commissioning involvement in the network. All of the 8 North West London PCTs contribute equally to support the network.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting. New investment plans for 2008/09 include:

Increasing capacity in Family Planning Clinics. New investment level to be determined.

Commissioning GPs to provide chlamydia screening and asymptomatic STI screening.

Commissioning services at HMYOI Feltham, to provide chlamydia screening and in time moving to offering other sexual health services. New investment level to be determined.
Islington PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within commissioning. The Director of Strategy and Commissioning (PCT and Social Services) has overall responsibility. The Commissioning Manager (Acute and Programmes) leads on sexual health commissioning. 35-40% of this post is dedicated to sexual health and HIV commissioning. Other responsibilities include: diabetes, retinal screening and the Camden PCT SLA. The Commissioning Manager (Acute and Programmes) is currently also the lead commissioner for new pan-London contracts with Brook, and is the coordinating commissioner for Camden PCT provided GUM services.

Sexual health needs assessment

The PCT is currently in the process of carrying out a rapid, service-targeted needs assessment, working jointly with public health and commissioning and closely with providers. This focuses on non-clinical sexual health promotion and HIV prevention. This is due to report findings and recommendations in June 2008.

The results of the needs assessment will help to identify gaps and duplication in current service provision for local sexual health promotion and HIV prevention only. These services are currently commissioned from Camden PCT provider side. The PCT will use the results of the needs assessment to decide whether the current service provision effectively meets local need.

Sexual health strategy

In March 2006 the PCT published a sexual health strategy. This was developed with involvement from public health, pharmacy, primary care commissioning, practice based commissioning, GP colleagues, local GUM and sexual and reproductive health service providers and clinicians and patients and the public.

The strategy will be revised during the course of 2008/09 and a new strategy will be in place for April 2009. The new strategy will be used as a basis for commissioning from its start in 2009.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £2,853,572 which represented 0.77% of the PCT’s recurrent allocation.

Detailed service specifications are developed annually in conjunction with service providers. They are approved at the beginning of each financial year. The following services currently use detailed service specifications: NCSP, contraceptive services, sexual health promotion and HIV prevention services, GUM services, CLASH, abortion services, Brook.

GUM services

In 2007/08 the PCT did not commission (host) any GUM services. Although physically located in Islington, the Archway Sexual Health Centre is provided by Camden PCT.

Community contraceptive / family planning services

Services were provided by the following:

Margaret Pyke Centre (Camden PCT Provider services) delivered Level 1, 2 and 3 contraceptive / family planning services, and Levels 1 and 2 (and working towards providing Level 3) STI screening and treatment services.

The Northern Health Centre and River Place Health Centre (Camden PCT Provider services) both delivered Levels 1 and 2 contraceptive / family planning services, and Levels 1 and 2 STI screening and treatment services.
Other commissioned sexual health services

Services were provided by the following:

**Brook London** delivered Level 1, 2 and 3 contraceptive / family planning services, and Level 1 and 2 STI screening and treatment. In 2008/09 these services will become nurse led.

**Pulse N7** delivered a young people’s service at Levels 1 and 2.

**Abortion services**

The sole provider was **Marie Stopes International** with a contract based on actual activity with the PCT invoiced monthly. An indicative budget was agreed at the beginning of the year. The MSI Central Booking Service booked NHS patients at one of their centres, the Royal Free Hospital or EGA at UCLH (up to 1 April 2008). The provider offered the following services; medical and surgical terminations (conscious sedation and general anaesthetic)

In 2008/09 the PCT will commission vasectomy services from this provider. The PCT are also exploring the possibility of commissioning BPAS through the MSI Central Booking Service.

**National Chlamydia Screening Programme**

There were collaborative commissioning arrangements between Camden and Islington PCTs, funding is on a 50:50 basis. The 2 PCTs have a joint screening office.

Chlamydia screening was offered at a variety of sites including contraceptive services, Marie Stopes, HMP Holloway, community pharmacies, Pulse N7, Brook, GP practices. The chlamydia Screening Office is in the process of rolling out screening to include student residences. GPs in the SH NES were paid only for positive results. In 2008/09 planned roll out of community pharmacy scheme to include 20 pharmacies (those currently offering EHC).

**Sexual health services provided by GPs outside of the GMS contract**

The PCT had a NES for sexual health and HIV services with 22 of the 39 Islington GP practices. Services were provided at Levels 1, 2 and 3 funded through the practice based commissioning budget.

**Pharmacy based services**

The PCT has a LES with 20 community pharmacies to provide emergency hormonal contraception. In 2008/09 the PCT will develop a LES for chlamydia screening with the same pharmacies.

**Locally-commissioned HIV and primary STI prevention**

Services were provided by:

**Camden PCT sexual health promotion and HIV prevention** delivered non-clinical training, education and research. The Good Sexual Health Team (formerly Gay Men's Team) and the African Communities Team worked with community groups. Activities included seminars, workshops, group work and outreach.

**Islington PCT** jointly funded 12 community voluntary organisations to work with local African communities for HIV prevention. Each organisation developed an annual work plan to address one of the areas in the jointly agreed HIV prevention in African Communities Commissioning Intentions. In 2008/09 the commissioning arrangement will be shifted from grant giving to an outcome based commissioning process. At the outset of 2008-09, there were six successful projects.

**Complementary Health Trust** provided complementary health therapies to HIV positive people.

**Bloomsbury User Group** provided advice and workshops to people living with HIV.

**YMCA** provided advice and counselling to Islington residents with HIV as part of the Positive Health programme.
**Service networks**

The PCT engaged with providers via its own Sexual Health and HIV Group, which met quarterly. It was chaired by commissioning, and membership included GUM, HIV and sexual and reproductive health providers, local GP representation, PBC, commissioning, public health, chlamydia screening coordinator. In addition commissioners met providers on a regular basis.

The PCT engaged with service users via service user involvement groups. It is also planning to consult service users via IVAC and Links during the development of the 2009-2014 strategy.

**Referral pathways**

Referral pathways were defined and agreed between the services identified below:

- Primary care and GUM
- Contraceptive services and GUM
- Community pharmacy and GUM
- Voluntary sector and GUM
- GUM and contraceptive services
- Primary care and contraceptive services
- Voluntary sector and contraceptive services
- NCSP and contraceptive services
- NCSP and general practice
- NCSP and pharmacy
- NCSP and GUM
- Voluntary sector and GUM

**Clinical network**

A North Central London Sexual Health Network is in the process of being established. It will consist of a combination of clinicians, commissioners and providers. The clinical lead has yet to be agreed.

**Commissioning and NEW investment plans for 2008/09**

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting.

New investment plans for 2008/09 include:

**Marie Stopes International:** vasectomy service.

The PCT has agreed investment plans for 2008-09, which include chlamydia screening, contraceptive services (including Brook and Pulse), abortion services, HIV testing and counselling.
Kensington & Chelsea PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within commissioning. The Associate Director of Acute and Specialised Commissioning has overall responsibility. The Sexual Health Lead is responsible for sexual health commissioning with 30% of the post’s time devoted to Kensington & Chelsea PCT sexual health commissioning and 70% devoted to specialised HIV treatment and care commissioning on behalf of the eight PCTs in North West London. Responsibilities include:

- Coordinating commissioner for the pan-London Positively Women contract.
- Coordinating commissioner for the GUM services at Chelsea & Westminster Hospital delivered from the John Hunter Clinic and Victoria Clinic.
- Hammersmith & Fulham PCT are the coordinating commissioner for GUM services delivered at Chelsea & Westminster Hospital from the West London Centre for Sexual Health (based at Charing Cross Hospital). K&C PCT undertake the planning and performance monitoring elements of the Hammersmith & Fulham PCT GUM contract on behalf of H&F PCT (which is responsible for the procurement aspects).
- Lead commissioner for the Chlamydia Screening Programme collaboratively commissioned by Kensington & Chelsea, Hammersmith & Fulham and Westminster PCTs.
- Lead commissioner for the NWL Sexual Health and HIV Network.
- Coordinating commissioner for the THT HIV Rapid testing service at Lighthouse West collaboratively commissioned by Kensington & Chelsea, Hammersmith & Fulham and Westminster PCTs.

In 2008/09 commissioning of sexual health services from GPs and community pharmacies will be undertaken by the Primary Care Department with support and advice from the commissioning department. The initial focus for this work will be chlamydia screening.

Sexual health needs assessment

The PCT commissioned a comprehensive sexual health needs assessment which will be completed in July 2008. However the PCT adopted an HIV Strategy and Action Plan in January 2008, based on 2006 SOPHID activity.

The 2008/09 comprehensive sexual health needs assessment will inform the development of a new joint sexual health strategy with Royal Borough of Kensington & Chelsea and will provide a robust evidence base with which to develop future strategic commissioning priorities and plans.

Sexual health strategy

In 2006 the PCT published a sexual health strategy. This was developed with a number if stakeholders including GUM and contraception providers, voluntary sector, PCT and Local Authority personnel.

The PCT’s sexual health strategy expired in December 2007, and was used to inform the existing commissioning portfolio. The Strategy focused on three aims; provision of culturally-sensitive sex education and advice, the prevention of teenage and unwanted pregnancies and the reduction of sexually transmitted infections (including HIV/AIDS) together with timely and appropriate treatment.

Kensington & Chelsea PCT together with the Royal Borough of Kensington & Chelsea has adopted a joint Public Health and Wellbeing Strategy called Choosing Good Health - Together (2007-2012), which includes a joint sexual health strategy.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £7,263,030 which represented 2.36% of the total PCT budget.
Detailed service specifications were used for commissioning the following services: GUM (acute SLA), Abortion (acute SLA), Contraception, chlamydia screening, Post acute HIV care (Mildmay Mission Hospital), Voluntary sector support services (HIV and Sex and Relationships Education), Sexual Health Enhanced GMS/PMS Premium Service (being implemented in 2008/09).

GUM services

The hosted provider of GUM services at Levels 1, 2 and 3 was the Chelsea & Westminster Hospital. In 2007/08 the GUM contract was hosted by Kensington & Chelsea PCT. In 2008/09 GUM has been dehosted and is now cross-charged and the value of outreach services for Kensington & Chelsea PCT (only) delivered from the John Hunter Clinic will be increased.

Community contraceptive / family planning services

Services were provided by the following:

Westside Contraceptive Services delivered Level 1, 2 and 3 contraceptive / family planning services, and Level 1 STI screening and treatment.

Chelsea & Westminster Hospital St Stephen’s Centre delivered Level 1 contraceptive / family planning services, and Level 1, 2 and 3 STI screening and treatment services.

The 2007/08 out-turn at the John Hunter Clinic has been used to calculate the 2008/09 Kensington & Chelsea PCT baseline on the basis that, a) the service is based in Kensington & Chelsea and, b) most people using the service will be Kensington & Chelsea residents.

Other commissioned sexual health services

Services were provided by the following:

Brook Advisory London delivered SRE.

Brook Advisory London delivered ‘R U Ready’ training for staff. In 2008/09 the training will be extended and commissioned through the Royal Borough of Kensington & Chelsea.

Rape Haven provided sexual assault service.

Abortion services

Services were provided by the following:

Imperial College Healthcare NHS Trust. This activity was funded under PbR on a cost and volume basis under HRG M10 (surgical termination of pregnancy) and M11 (medical termination of pregnancy) and included in the provider’s main SLA with Westminster PCT (which is the provider’s coordinating commissioner).

As well as the hospital based service, the trust runs three clinics a week at Raymede Clinic in Kensington & Chelsea (Westside Contraceptive Services), with the ability to see nine women per clinic but there is some flexibility to see more if needed. The trust holds a contract with the independent sector for rare cases with increased medical risk.

The trust offered abortion services up to 23 weeks and 6 days. Early medical abortion services have recently been offered as part of a DH pilot to explore the potential of offering access to medical abortion in non-acute settings. The trust offered two sessions with counsellors a week. The counsellors are employed independently and see a relatively small proportion (c10%) of women.

Chelsea & Westminster Hospital

This activity was funded under PbR on a cost and volume basis under HRG M10 (surgical termination of pregnancy) and M11 (medical termination of pregnancy) and included in the provider’s main SLA with Kensington & Chelsea PCT (which is the provider’s coordinating commissioner). The trust offered abortion services up to 23 weeks and 6 days and also offered early medical abortion services.

Westside Contraceptive Services provided an assessment and booking service for NHS abortions (the funding for this service was included in the provider’s block contraception contract - see earlier section).
National Chlamydia Screening Programme

The PCT, together with Hammersmith & Fulham PCT and Westminster PCT, collaboratively commissioned the Chlamydia Screening Programme from Chelsea & Westminster Hospital. The programme was transferred in-year to a new provider (Westside Contraceptive Services) in January 2008. The 2007/08 budget included laboratory and treatment costs and testing services.

Screens and treatment and management of patients and partners was commissioned from Chelsea & Westminster Hospital from April 2007 to December 2007 and from Westside Contraceptive Services from January 2008 to date.

In 2008/09 the PCT has a further budget to roll-out chlamydia screening in community pharmacies - this is set out in the pharmacy section below. Primary care also has a further budget to implement enhanced GMS/PMS LES for sexual health and this will include chlamydia screening in the first instance- see primary care section below.

Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission any sexual health services provided by GPs outside of the GMS contract.

In 2008/09 the PCT has developed an enhanced GMS for sexual health and a PMS LES which in Year 1 will focus on chlamydia screening. 1 practice (based at Lighthouse West) currently delivers services and the PCT anticipate that 10 practices will be on line by the end of 2008/09.

Pharmacy based services

In 2007/08 the PCT did not commission any pharmacy based services. In 2008/09 the PCT will invest further funds in the roll out of chlamydia screening in community pharmacies.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Westminster PCT (Condom Scheme) and Kensington & Chelsea PCT (pharmacy purchasing and distribution) - to procure and distribute condoms to GPs, voluntary sector organisations and NHS hospitals.

Additional investment in 2008/09 will include funding the West London Gay Men's Project to provide additional 24's (condoms) to the Kobler Centre at Chelsea & Westminster Hospital (to support secondary prevention for HIV positive people).

The River House Trust - to provide support services, advice and complementary therapies to people with HIV.

Naz Project, London - to provide primary and secondary prevention and support for people with HIV and people with health promotion needs.

Terrence Higgins Trust / Lighthouse West - to provide community support, rapid HIV testing, newly diagnosed group and complementary therapies to people with HIV and people seeking HIV testing.

SW5 (Streetwise), Terrence Higgins Trust - to provide support services to male sex workers. The service was decommissioned in 2007/08 and has not been commissioned in 2008/09 pending development of a new sexual health strategy.

Living Well, to deliver an HIV self management programme.

Love Safely, BME HIV testing. In 2008/09 the service has not been commissioned pending the development of the new sexual health strategy.
Service networks

The PCT together with Westminster PCT supports a provider forum called the Westminster Chelsea and Kensington Sexual Health Providers Forum. The PCT’s Sexual Health Strategy Group has not met since the expiry of the sexual health strategy in December 2007. A new Strategy Group will shortly be established following the publication of the Comprehensive sexual health needs assessment.

The Chlamydia Steering Group included provider representatives but was disbanded when the Chlamydia Screening Programme was transferred to a new provider in January 2008. The Steering Group has been reformed to include public health directors and commissioning only and Westside Contraceptive Services (the new CSP provider) is currently establishing a new operational/stakeholder group of providers (to replace the original steering group).

The NWL Sexual Health and HIV Network has sub-groups for HIV, GUM and primary care which includes providers.

The PCT supports the Kensington & Chelsea HIV Service Users Forum. HIV patients also attend the KVN (HIV) Patients Forum at Chelsea & Westminster Hospital and the Whalfside (HIV) Patients Forum at Imperial Healthcare Hospital.

Referral pathways

Referral pathways were defined and currently agreed between the services identified below:

- Contraceptive services and GUM
- Voluntary sector and GUM
- GUM and contraceptive services
- Voluntary sector and contraceptive services
- NCSP and contraceptive services
- Voluntary sector and GUM

Where formal agreed referral pathways do not exist these are being developed in 2008/09.

Clinical network

The PCT is part of the North West London Sexual Health and HIV Network. Dr Gary Brook is the Clinical Lead (NWL Hospitals Trust) and Melanie Britton is the Network Manager. The network is provider led with commissioning involvement.

Commissioning and NEW investment plans for 2008/09

The PCT currently has no specific plans to shift existing activity out of an acute setting, although this may change as a result of developing a new sexual health strategy. It does have plans to commission additional and new activity in a non acute setting.

New investment plans for 2008/09 include:

**Design Options** - to carry out a Comprehensive sexual health needs assessment.

**Project Management Costs** - The PCT plans to develop a care model to meet the primary care needs of HIV patients within primary care (the model would be considered by the PCT as part of its future planning to meet the needs of all residents with long term conditions). The budget is to commission an external facilitator and an external evaluator.

**Roll-out of chlamydia (and gonorrhoea) screening** in community pharmacies.

Primary Care Commissioning budget to support the development of a **Sexual Health Enhanced GMS and PMS Premium Service**.

**Kensington & Chelsea HIV Service Users Forum.**
HIV Strategy and Action Plan - to develop the involvement of Chelsea & Westminster Hospital in the provision of HIV and sexual health services within primary care, community contraceptive services and the voluntary sector.

New funding to support the Westminster, Chelsea and Kensington Sexual Health Providers Forum.

New funding in ‘R U Ready’ Sex and Relationships Education training for staff. The funding will be passed to RBKC which will commission the training from an external consultant (who also delivered the training in 2007/08 under a contract between the PCT and Brook London). This is being dealt with as new funding because it was approved through the PCTs Health Investment Process and there has been a change of provider.

Contraception Access - The PCT has a new budget (made available by the DH) to improve access to contraception services. This budget has not yet been allocated.

Chlamydia Screening Contingency - The PCT will increase its investment in 2008/09. In addition the PCT is holding a contingency to augment screening capacity if required.
Kingston PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, responsibility for sexual health is shared between commissioning and public health. The Director of Performance has overall responsibility for commissioning, and also leads on sexual health. This post oversees commissioning for acute, community, mental health and primary care. 3% of the post’s time is dedicated to sexual health.

Kingston PCT is the lead commissioner for the South West London Chlamydia Screening Programme.

Sexual health needs assessment

In July 2007 a comprehensive sexual health appraisal was undertaken. This was undertaken with various services including GUM, contraception, chlamydia screening and young people’s sexual health. Following this the PCT commissioned a comprehensive sexual health needs assessment which will be completed by July 2008.

A Joint Strategic Needs Assessment is due for completion by October 2008.

Sexual health strategy

The PCT currently has a draft sexual health strategy in place. The following will be consulted to inform its further development: sexual health commissioner, public health consultant, GUM consultant, contraceptive medical lead and community contraception medical staff, contraception lead nurse, community contraception nursing staff, permanent Integrated services manager, services manager, PCT PEC representative or GP sexual health clinical champion, associate director (Children and Families Director), teenage pregnancy co-ordinator and members of the TP task group, local authority lead (strategic manager of youth offending team, Connexions, youth service) and relevant LA stakeholders (operational), voluntary organisation representatives (African Positive Outlook and anyone that the PCT has prospective SLAs with e.g. Brook, THT).

The PCT intend to use to the strategy as a basis for commissioning via development of a three-tiered integrated service model.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £1,580,214 which represented 0.75% of the total acute PCT budget.

Detailed service specifications were used for commissioning the Community Pharmacy emergency hormonal contraception scheme.

GUM services

The hosted provider was Kingston Hospital NHS Trust which delivered services at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1 and 2 was Kingston PCT Provider Services (Hawks Road Clinic).

Other commissioned sexual health services

The sole provider was KU19 which provided contraceptive and family planning services for young people at Level 1 in three sites across the PCT (Siddeley House, Hawks Road Clinic and YMCA).
Abortion services

The sole provider was **British Pregnancy Advisory Service** with a contract based on cost and volume. The provider offered the following services; medical and surgical abortions up to 24 weeks, sterilisation and vasectomy and contraception (IUD, Mirena, Implanon - supply and fit). In 2008/09 chlamydia screening will also be offered, and the pan-London service specification for abortion services will be adopted.

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between South West London PCTs (Merton, Sutton, Wandsworth, Croydon, Kingston and Richmond) which commissioned one Chlamydia Screening Office. Kingston PCT was the lead commissioner.

In Kingston PCT the NCSP provider was outreach commissioned from Brook London and the KU19 service, provided by **Kingston PCT Provider Services**.

Treatment and management of chlamydia positive patients was undertaken by the GUM clinic. However in 2008/09 this will be provided via KU19, and community contraception clinics, as well as the university health centre. In 2008/09 contracts will also be developed for GPs and community pharmacies to participate in the NCSP programme. Remuneration will be as follows:

Sexual health services provided by GPs outside of the GMS contract

The PCT had a LES for open access family planning at 4 practices across the PCT providing service at Level 1.

The PCT had a NES for IUCD in 19 practices.

In 2008/09 the PCT will investigate providing services at Levels 1 and 2.

Pharmacy based services

A LES contract provided emergency hormonal contraception in 3 pharmacies in the PCT.

A LES contract provided emergency hormonal contraception (university scheme) at 2 pharmacies in the PCT.

Locally-commissioned HIV and primary STI prevention

There were collaborative commissioning arrangements with other South West London sector and South London PCTs.

Services were provided by:

**South London HIV Partnership** (comprises THT, The Positive Place, NAM, SLAM, NAW Solutions, Meganexus), delivered advice and advocacy, counselling, emotional and peer support for people with HIV living in south London. The service was commissioned jointly with other South West and South London PCTs.

**Family Support (Karibu)**, delivered family support services to families affected by HIV including social work services, family projects around education, disclosure, stigma, a summer play scheme, respite for carers, a fathers group and outreach to hard to reach communities. The service was commissioned jointly with other South West and South London PCTs. In 2008/09 the service is due for re tender.

**African Culture Promotions**, condom distribution scheme for businesses and social venues used by African communities in South West London. The service was commissioned jointly with other South West and South London PCTs.

**SHAKA “Badinnabed” project**, delivered sexual health information in community settings and via specific events. Targeting young African / African Caribbean communities via detached work. The service was commissioned jointly with other South West and South London PCTs.

**THT**, Terrence Higgins Trust delivered development work targeted at young gay men in order to support mainstream services in more effectively meeting the needs of the local gay population. The service was commissioned jointly with other South West and South London PCTs. In 2008/09 the service is due for re tender.
Service networks

The PCT engaged with its providers via the Kingston Sexual Health and HIV Partnership Group (strategy group) which met quarterly, the South West London Sexual Health Implementation Group (for programme leads, network leads, and commissioner leads) which met quarterly and the Teenage Pregnancy Partnership Board which met quarterly.

The PCT engaged with service users via providers’ surveys and the BPAS patient survey. The chlamydia screening media group consults with young people.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
- Primary care and GUM
- Contraceptive services and GUM
- Community pharmacy and GUM
- Voluntary sector and GUM
- GUM and contraceptive services
- Primary care and contraceptive services
- Community pharmacy and contraceptive services
- Voluntary sector and contraceptive services
- NCSP and contraceptive services
- NCSP and general practice
- NCSP and GUM
- Voluntary sector and NCSP

Clinical network

The PCT’s providers are members of SWAGNET. The clinical lead is Dr Paul Lister and the Network Manager is Janine Railton. SWAGNET is provider led but there is no commissioner involvement. All 5 South West London PCTs contribute to the costs of SWAGNET.

The network is funded at sector level with funding received through the London HIV Consortium and through cross charging all the 5 PCTs in the sector. Each PCT contributes on a population prevalence basis as per SOPHID calculations.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional or new activity in a non acute setting.

The PCT are modernising the way sexual health services are delivered locally. Changes to sexual health will encompass all sexual health services including GUM. The new service will operate under a tiered and integrated model of delivery. This will enable the provider to establish a creative and innovative mix of consultant and nurse led provision.

New investment plans for 2008/09 include:

- **Sexual Health Promotion Specialist post** - to lead on setting up sexual health Levels 1, 2, and 3 services in community based sites and schools.

- **Public Health Nurse (sexual health)** - Development of roles and responsibilities currently being developed between public health and the provider services - to interface with community sexual health young peoples’ nurse.
General information

Within the PCT structure, sexual health sits within commissioning. The Joint Directors of Strategy and Commissioning share overall responsibility. The Sexual Health Commissioner leads on commissioning. This post is dedicated to sexual health commissioning across Lambeth and Southwark PCTs. In addition the post is responsible for commissioning London-wide HIV prevention and community support, and for commissioning these for South London and local populations.

Sexual health needs assessment

In 2006 the PCT undertook a comprehensive sexual health needs assessment in collaboration with Southwark PCT. As there are demographic similarities between the two boroughs, both worked closely to modernise sexual health services through the Sexual Health Modernisation Initiative (SHMI) 2003-07.

The sexual health needs assessment provided the baseline epidemiological data of the numbers of STIs at GUM clinics as comparators to the rest of London and provided a baseline for sexual ill health in Lambeth and identified target populations which included young people, MSM, black Africans and African Caribbean populations and young people.

The PCT used findings as a basis for commissioning until publication of the Lambeth sexual health strategy in 2006 which has since driven commissioning.

Sexual health strategy

In 2006 the PCT published a sexual health strategy. Its purpose was to create an integrated care pathway and continuum of services across prevention and health promotion. The strategy was developed by stakeholders including: teenage pregnancy and Parenting Partnership (Lambeth PCT and Lambeth Council), Guys and St Thomas’ Trust (GSTT) Sexual Health Modernisation Initiative in partnership with Lambeth PCT, acute trusts, Kings and GSTT, voluntary sector organisations, Terrence Higgins Trust, Brook, community services and primary care.

The PCT has used the strategy to inform the location of new services and the targeting of specific groups and in developing commissioning plans for 2007/08 and 2008/09.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £9,445,296 which represented 1.82% of the total PCT budget.

Detailed service specifications were not used to commission services in 2007/08.

GUM services

The hosted provider was Guys and St Thomas’ Hospital NHS Foundation Trust at Levels 1, 2 and 3.

Community contraceptive / family planning services

Services were provided by:

Lambeth PCT Provider Services (Lambeth Reproductive Health Service - LRHS) at Levels 1 and 2. This provider also delivered STI treatment and testing at Levels 1 and 2. In 2008/09 this provider has been commissioned to deliver an integrated sexual health centre at Streatham Hill, opening June 2008.

Camberwell Sexual Health Centre, Kings College Hospital, at Levels 1 and 2, this provider also delivered STI treatment and testing at Levels 1 and 2.
Other commissioned sexual health services

Services were provided by the following:

**Brook London** delivered Level 1 and 2 contraceptive / family planning services and Level 1 and 2 STI testing and treatment.

**Surestart Plus**, delivered Level 1 and 2 contraceptive / family planning services. In 2008/09 this contract will be fully mainstreamed with a budget jointly shared with the local authority.

Abortion services

Services were provided by the following:

**British Pregnancy Advisory Service.** This contract was a cost and volume contract based on the previous years out-turn. The provider offered the following services; medical and surgical terminations up to 19 weeks and with PCT agreement a few late abortions to 23 weeks. The provider is also commissioned to provide contraception especially LARC. In 2007/08 BPAS provided 40% of the PCT’s abortions. In 2008/09 the provider will offer chlamydia screening for self-referrals and referral pathways for under 19s back to community sexual health centres as well as opt out HIV testing and onward referral to GUM.

**Marie Stopes International.** This was a cost and volume contract with agreed activity levels based on the previous years out-turn. The provider offered the following services; medical and surgical terminations up to 19 weeks and with PCT agreement a few late abortions to 23 weeks. The provider was also commissioned to provide contraception especially LARC. In 2007/08 MSI provided 52% of the PCTs abortions. In 2008/09 the provider will offer chlamydia screening for self-referrals and referral pathways for under 19s back to community sexual health centres. In addition an opt out model of HIV testing with referral to GUM for results.

**Kings College Hospital.** This was a cost and volume contract with agreed activity levels based on the previous years out-turn. The provider offered procedures for those under 16 years, those requiring abortions over 19 weeks and for those clients at risk of complications during or after the procedure. The provider was also commissioned to provide contraception including LARC. In 2007/08 Kings College Hospital provided 8% of the PCTs abortions.

**Southwark PCT hosted central booking service for abortions** recharged to Lambeth.

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between Lambeth and Southwark PCTs. The Chlamydia Screening Office coordinated training and development of screening sites in clinical and non clinical settings. They also coordinated treatment of positive patients, sign-posting to treatment sites, GPs, Community Sexual Health Clinics, Brook and selected pharmacies.

Funding was contributed through the Lambeth and Southwark Modernisation Initiative project into the GP incentive scheme for Lambeth (GP champion role funded within this). GPs were incentivised through a two-stage payment on attainment of the 10 and 15% targets.

Sexual health services provided by GPs outside of the GMS contract

The PCT had the following contracts:

A NES / PMS for IUCD fitting with 28 GP practices across Lambeth.

A LES GPwSI in community medical Gynaecology.

Pharmacy based services

In 2008-09 the PCT is developing a LES for Level 1 chlamydia screening at 30 or more pharmacies across the PCT.
Locally-commissioned HIV and primary STI prevention

There were collaborative commissioning arrangements between Southwark, Lambeth and Lewisham PCTs for HIV prevention. The budget split is based on SOPHID data with contributions as follows. Lambeth 47%, Southwark 33% and Lewisham 20%. In addition local work is commissioned on a PCT wide basis.

Services were provided by:

**Women being concerned**, delivered outreach, training workshops to African and Muslim communities.

**SHAKA**, delivered a condom scheme in black business and social venues.

**WANI**, delivered outreach, workshops and training to West African communities.

**Neovenator**, delivered outreach, workshops and training to West African communities.

**AAF**, delivered outreach, training and workshops to African and Muslim communities.

**AAF**, delivered outreach and community mobilisation work with young people and support for parents, volunteering and 1:1 interventions to African and Muslim communities.

**AAF**, delivered outreach, peer education re HIV, workshops and resource development to African men.

**AAF**, delivered outreach, community mobilisation, young peoples’ services, volunteering.

**LEAT (CHIPS)**, African communities - Christian outreach.


**NPL** African communities Somali - needs assessment for Somali young people.

**S Kalema Assoc** African communities - general; organisational development support to African CBOs and faith communities.

**ARCHRO (LSLAMP)** African men- outreach, peer educators encouragement of HIV testing, work shops and resource development.

**TAIFIA (LSLAMP)** African communities - outreach, peer educators encouragement of HIV testing, work shops and resource development.

**ARCHRO (LSLAMCAH)** African communities - Muslim: outreach, training and workshops Mosques and Islamic Centres, mentoring programme of mosques. Resources development.

**DAYREEL(LSLAMCAH)** African communities - Muslim; outreach, training and workshops Mosques and Islamic Centres, mentoring programme of mosques. Resources development.

**NBICC (LSLAMCAH)** African Communities - Muslim; outreach, training and workshops Mosques and Islamic Centres, mentoring programme of mosques. Resources development.


**SHAKA** Outreach, mobilisation including targeted work with African gay men/MSM.

**NPL(lead) AAF, NBICC, LEAT, EHF** African communities general and Faith communities - 1:1 interventions, small groups.

All of the above services underwent a re tendering process in the autumn of 2007.

The PCT commissioned one- off development work in 2007 from the following organisations:

**Michael Bell Associates**, delivered an African communities HIV prevention programme.
SHAKA, delivered health promotion training and capacity building skills for S African CBOs.

Mainliners, delivered intravenous drug user and working women’s outreach focussing on harm minimisation.

Metro, delivered outreach to gay men.

ERGO, worked with gay men contributing to the needs assessment.

Streetwise, delivered outreach to male sex workers.

Development work with African CBOs.

Statutory contribution to HIV component of healthier schools.

Working Women’s Clinic.

Service networks

The PCT engaged with providers via the quarterly Termination of Pregnancy Pan Providers meeting, the quarterly Lambeth Sexual Health Forum, the bi-monthly SE Sector HIV Network, and the Lambeth and Southwark Sexual Health Network (Lasshnet).

The PCT engaged with users via the Mystery Shopping Programme developed by the SHMI. Service users were consulted in the production of new service promotion literature, self care pathways, touch screen booking and self triage systems Client satisfaction surveys have been and will continue to be used at service level. Two service user organisations have been commissioned around HIV care and support across South East London and Lambeth PCT contributes financially to this.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Community pharmacy and GUM
Voluntary sector and GUM

Clinical network

The PCT’s providers are members of a Sexual Health Clinical Network across SE London which will meet in June 2008. The SEL HIV network has been in operation since 2006. Dr Mike Brady (Caldecot) is the Clinical Lead and the Network Manager is to be appointed.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting.

GSTT GUM plan to relocate their service into a community setting and develop a Level 2 front end providing integrated GUM / RSH in the same way as King’s at Camberwell in partnership with community providers over the next few years. An asymptomatic screening tariff will be developed and applied regardless of setting.

New investment plans for 2008/09 include:

Lambeth Community Sexual Health Centres, Level 1 and 2.

Camberwell Sexual Health Centre.

NCSP - GP Incentive scheme. Additional investment.

Community Pharmacy LES for 36 pharmacies to offer EHC, condoms and chlamydia / gonorrhoea testing. 6 of the 36 pharmacies will offer treatment for chlamydia and will be paid as a Level 2 provider (according to community pharmacy) although according to the National Strategy they will be offering a Level 1 service.
GP Out of Hours enhanced service, providing Level 2 services in three sites across the borough.
General information

Within the PCT structure, sexual health sits between commissioning and public health. The Director of Commissioning shares overall responsibility with the Director of Public Health. The Head of Adult Community Commissioning leads on sexual health commissioning. 20% of the post is devoted to sexual health. The post is also responsible for the commissioning of all adult services.

Sexual health needs assessment

The PCT undertook a baseline sexual health needs assessment in 2002. This was followed by a health equity audit on access to sexual health services including HIV, STI, contraception and abortion services in 2005. The PCT also did a health equity audit on teenage conception in 2005. In 2007 the South East London PHPA published an STI report.

The PCT has used the recommendations from the various reports to present to the sexual Health Strategy Group, the Commissioning Board and the Teenage Pregnancy Board. This has informed commissioning decisions and will do so in the future.

Sexual health strategy

In 2008 the PCT published a sexual health strategy. The strategy was developed by stakeholders including: Health First (Health Promotion Unit), University Hospital Lewisham, voluntary organisations, GPs, the PCT provider services and the local authority. The strategy will be due for review in 2011.

The PCT has used the strategy to inform priorities for investment and resource allocation for commissioning.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £4,522,416 which represented 1.06% of the total PCT budget.

Detailed service specifications were used for the commissioning the following: pharmacy LES, HIV prevention with the voluntary sector, condom distribution, Health First, chlamydia screening LES, abortion services.

GUM services

In 2007/08 the PCT did not commission (host) any GUM services. GUM services were provided by Lewisham PCT Provider Services, as part of the integrated reproductive and sexual health service at Levels 1 and 2.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Lewisham PCT Provider Services. This provider also delivered STI testing and treatment services at Level 1, 2 and 3.

In 2008/09 this provider will receive additional investment to run two rapid HIV access clinics to support LAA targets. The PCT will also look at any business cases put forward as part of their commissioning intentions. In addition the PCT has new funding for access to contraception and is currently scoping opportunities for spend.

Other commissioned sexual health services

Services were provided by the following:

Health First delivered Level 1 contraceptive / family planning services. This contract stopped in June 2008.

GP facilitator salary to provide support to GP practices.
Abortion services

Services were provided by the following:

**British Pregnancy Advisory Service.** This contract was a cost and volume contract based on the previous years out-turn. The provider offered the following services; medical and surgical terminations up to 19 weeks and with PCT agreement a few late abortions to 23 weeks. The provider is also commissioned to provide contraception especially LARC. In 2008/09 the provider will offer chlamydia screening for self-referrals and referral pathways for under 19s back to community sexual health centres as well as opt out HIV testing and onward referral to GUM.

**Marie Stopes International.** This contract was a cost and volume contract with agreed activity levels based on the previous years out-turn. The provider offered the following services; medical and surgical terminations up to 19 weeks and with PCT agreement a few late abortions to 23 weeks. The provider is also commissioned to provide contraception especially LARC. In 2008/09 the provider will offer chlamydia screening for self-referrals and referral pathways for under 19s back to community sexual health centres. In addition an opt out model of HIV testing with referral to GUM for results.

**Kings College Hospital.** This was a PbR contract. The provider focussed on complex needs cases.

**National Chlamydia Screening Programme**

The provider commissioned to deliver the programme was Lewisham Sexual and Reproductive Health Service, part of *Lewisham PCT Provider Services*. Screening and treatment was via Lewisham Sexual and Reproductive Health Service, selected GPs and three community pharmacies.

**Sexual health services provided by GPs outside of the GMS contract**

The PCT had a LES for sexual health services to be delivered in 13 practices at Level 1. This included chlamydia screening.

**Pharmacy based services**

The PCT had a LES providing emergency hormonal contraception in 15 pharmacies across Lewisham.

The PCT had a pilot LES providing chlamydia and gonorrhoea screening and treatment in 3 pharmacies across Lewisham.

**Locally-commissioned HIV and primary STI prevention**

Services were provided by the following:

**Lambeth PCT Provider Services** - various contracts with voluntary sector organisations, hosted by Lambeth PCT.

**Service networks**

The PCT engaged with providers via its Sexual Health Strategy Group which met quarterly and the Chlamydia Screening Group which met six monthly. Membership included: public health, SandRH, HIV, GP rep, health promotion, teenage pregnancy unit, voluntary sector, commissioners.

The PCT engaged with service users via stakeholder events and user groups, working with community groups and voluntary organisations, mystery shopper exercises and 1:1 interviews with clients.

**Referral pathways**

Referral pathways were defined and agreed between the services identified below:

- Contraceptive services and GUM
- GUM and contraceptive services
- Primary care and contraceptive services
- Community pharmacy and contraceptive services
- Voluntary sector and contraceptive services
NCSP and contraceptive services
NCSP and general practice
NCSP and pharmacy

Clinical network

The PCT’s providers are members of the SE London HIV and Sexual Health Clinical Network. The network is in the early stages of development and has involvement from both commissioners and providers. At the present time no financial contribution is required or made but in the future this may change.

Commissioning and NEW investment plans for 2008/09

New business cases are currently being put forward to determine new investments plans for 2008/09.
Newham PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within public health. The Director of Public Health has overall responsibility. The Associate Director for Specialist Commissioning leads on sexual health commissioning. 50% of the post is devoted to sexual health. Other commissioning responsibilities include children, young people and London Borough of Newham. In addition this post leads integrated commissioning across the local authority for young people, sexual health services and teenage pregnancy.

Sexual health needs assessment

In 2006 the PCT undertook a rapid sexual health needs assessment which was followed by other epidemiological work and needs assessment in 2007.

The PCT has used findings to develop plans and new developments for commissioning.

Sexual health strategy

In 2006 the PCT published a sexual health strategy. The strategy was developed by stakeholders including: GPs, the acute trust, voluntary organisations, Newham Youth Parliament and Connexions. The strategy is due for revision in 2008.

The PCT has used the strategy’s action plan to inform commissioning.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £4,317,074 which represented 0.97% of the total PCT budget.

Detailed service specifications were used for the commissioning the following: GUM services, abortion services, chlamydia screening, teenage pregnancy and contraceptive services.

GUM services

The hosted provider of GUM services in 2007/08 was Newham University Hospital, at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1 and 2 was Newham Family Planning Service, part of Newham PCT Provider services.

Other commissioned sexual health services

The sole provider of services was Teenage Pregnancy Team, hosted by the London Borough of Newham including Young Peoples Sexual Health services, provided by Newham PCT Provider Arm which delivered Level 1 contraceptive / family planning services and Level 1 STI testing and treatment services for young people.

Abortion services

Services were provided by the following:

Newham University Hospital. This was a PbR contract. The provider offered the following services; medical up to 9 weeks, surgical up to 19 weeks. In 2007/08 Newham University Hospital provided 95% of the PCTs abortions.
British Pregnancy Advisory Service. This contract was an SLA. The provider offered surgical procedures between 20 - 24 weeks. In 2007/08 BPAS provided 5% of the PCTs abortions.

National Chlamydia Screening Programme

Newham PCT Provider Services manage the Chlamydia Screening Office. The PCT has a contract with Barts and The London NHS Trust to provide laboratory services.

Provider Services coordinated the programme, screening, treatment and partner notifications. The Terrence Higgins Trust provided screening as did some pharmacies.

In 2008/09 there will be an increased contract with THT, chlamydia screening within abortion contracts and remuneration for GPs.

Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission sexual health services provided by GPs outside of the GMS.

Pharmacy based services

A contract provided emergency hormonal contraception plus C-Card for under 19s, and C-Card only for under 25s in 23 pharmacies across Newham.

In 2008/09 there are plans to extend EHC eligibility to all ages.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Newham HIV / AIDS Prevention Partnership, which delivered prevention activities, HIV awareness and education to African communities.

Small grant schemes for local voluntary organisations.

Service networks

The PCT engaged with its providers via a multi agency sexual health steering group which met every 6 weeks, with representatives from GUM, GPSI, contraceptive services, pharmacists, voluntary organisations, teenage pregnancy programme. There are 5 working sub groups - teenage pregnancy (meets monthly), chlamydia (meets 3 weekly), prevention (just started, African HIV prevention steering group (meets 6 weekly), contraception (meets infrequently).

The PCT engaged with service users via user representation on the HIV African Communities Group, Prevention Group and the Teenage Pregnancy Group. In addition young people were consulted in relation to the local chlamydia screening strategy.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Primary care and contraceptive services
Community pharmacy and contraceptive services
NCSP and contraceptive services
NCSP and general practice
NCSP and pharmacy
NCSP and GUM
Voluntary sector and NCSP
Clinical network

The PCT’s providers are members of the NE London HIV and Sexual Health Network. The clinical lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting. New investment plans for 2008/09 include:

Community based rapid HIV testing.
Redbridge PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within strategy and planning. The Director of Strategy and Planning has overall responsibility. The lead commissioner is yet to be determined in the new PCT structure.

Sexual health needs assessment

In 2003 the PCT undertook a baseline sexual health service mapping. This was followed in 2005 by a GP sexual health provision survey and a contraception and sexual health needs assessment. In 2006 the PCT undertook a service user consultation exercise and in 2008 a sexual health training needs analysis.

The PCT has used findings to develop a detailed sexual health service specification for an integrated sexual health service at Levels 1-3 which it put out to tender. The new provider will be in place for August 2008.

Sexual health strategy

In 2004 the PCT published a sexual health strategy. The strategy was developed by stakeholders including: service leads for GUM, contraception and HIV, voluntary organisations, agencies and community groups, teenage pregnancy coordinator, Healthy Schools, service user representatives and frontline workers. The Strategy is reviewed annually.

The PCT has used the strategy to inform commissioning of an integrated service at Levels 1-3.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £1,536,725 which represented 0.47% of the total PCT budget.

Detailed service specifications were used for the commissioning the following: abortion and contraception services, including enhanced emergency hormonal contraception services with pharmacies, prevention programmes.

GUM services

The hosted provider of services was Barking, Havering and Redbridge NHS Trust at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1 and 2 was Redbridge Family Planning Service, part of Redbridge PCT Provider services.

Other commissioned sexual health services

The sole provider of services was Brook, London which delivered Level 1 and 2 contraceptive / family planning services.

Abortion services

The sole provider was Marie Stopes International. This was an indicative volume contract. The provider offered the following services; medical and surgical abortions terminations to 24 weeks and the provision of contraception including LARCs post abortion.

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between Redbridge, Havering and Barking & Dagenham PCTs. Terrence Higgins Trust was commissioned as the provider of services. In 2008/09 the PCT
will commission a LES with GPs and Pharmacists.

**Sexual health services provided by GPs outside of the GMS contract**

There was an NES contract for IUD fitting in 16 practices across Redbridge.

**Pharmacy based services**

The contract provided emergency hormonal contraception in 30 pharmacies across Redbridge.

In 2008/09 there are plans to extend EHC eligibility from women under 19 years to women under 25 years.

**Locally-commissioned HIV and primary STI prevention**

Services were provided by:

- **Positive East (Lead for 2 organisations)**, which delivered prevention activities, HIV awareness and education campaigns, outreach, drop in work and condom distribution to MSM.
- **Sahara Communities Abroad - Sacoma (Lead for 3 organisations)**, which delivered prevention activities, HIV awareness and education campaigns, outreach, drop in work and condom distribution to African Communities.
- **Redbridge Drugs and Health Education Team**, which delivered SRE policy development, training and support to teachers and parents.
- **Living Well**, which delivered in formation and advice, self management programmes and facilitator training to people living with HIV.
- **Pasante HealthCare**, which delivered a condom distribution scheme and provided in training.

**Service networks**

The PCT has engaged with its providers via the Sexual Health and Teenage Pregnancy Strategy Group and the Sexual Health Promotion Group which both met three times a year.

The PCT engaged with service users via commissioned voluntary and community sector organisations and service user feedback.

**Referral pathways**

Referral pathways were defined and agreed between the services identified below:

- Community pharmacy and GUM
- Community pharmacy and contraceptive services

**Clinical network**

The PCT's providers are members of the NE London HIV and Sexual Health Network. The clinical lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement. The PCT are unable to specify the financial contribution they made to the network.

**Commissioning and NEW investment plans for 2008/09**

The PCT has specific plans to shift existing activity out of an acute setting. New investment plans for 2008/09 include:

- **Integrated Sexual Health Service** as described earlier at Levels 1, 2 and 3.
- **Community based rapid HIV testing** (Level 1) delivered by the PCT Long Term Conditions Team.
- **LES for GPs and pharmacies**, to deliver chlamydia screening.
Richmond & Twickenham PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within public health. The Director of Public Health has overall responsibility. The Public Health Programme Lead, Sexual Health, is responsible for sexual health commissioning, though the Associate Director for Health and Well-being and the Associate Director Acute and Specialised Commissioning are also involved.

Sexual health needs assessment

In 2007 the PCT commissioned a rapid, service targeted sexual health needs assessment. This was undertaken in conjunction with a review of sexual health services. The review covered prevention, screening, Levels 1, 2 and 3 contraceptive and sexual health services with a view to modernising sexual health services and commissioning a model of care based on national guidance.

The findings and recommendations from the review are a key focus for the 2008/09 sexual health action plan. Discussions on how to take these forward are currently being discussed in collaboration with the PCT’s Sexual Health Implementation Group.

Sexual health strategy

In 2004 the PCT published a sexual health strategy. This was informed by consultation with the local authority teenage pregnancy unit, Sexual Health Implementation Group, PEC and service users.

The work that has been delivered in the past has been based on the 2004 strategy. Future work will be based on findings from the 2007 service targeted sexual health needs assessment.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) £1,389,242 which represented 0.56% of the total PCT budget.

Detailed service specifications were used for the following: GUM, abortion services, voluntary sector, young people sexual health services, chlamydia screening, pharmacy, general practice and family planning.

GUM services

West Middlesex Hospitals NHS Trust at Levels 1, 2 and 3. The PCT did not host this service but services delivered formed part of the PCT’s block contract with the provider.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1 and 2 was Richmond & Twickenham PCT Provider Services which also provided Levels 1 and 2 STI screening and treatment.

Other commissioned sexual health services

Young People’s Sexual Health Service (Richmond & Twickenham PCT) provided Levels 1, 2 and 3 contraceptive and family planning services, and Levels 1 and 2 STI screening and treatment services.

Abortion services

Services were provided by the following:

BPAS. In 2007/08 BPAS provided 34% of the PCT’s abortions. (The PCT did not give any further information on
the contract type or services offered). In 2008/09 the service specification will be reviewed and drawn in line with pan-London guidelines for commissioning abortions.

**West Middlesex Hospital.** This was a PbR contract. The provider offered the following services; medical and surgical abortions up to 12 weeks. In 2007/08 the West Middlesex Hospital provided 66% of the PCT’s abortions. In 2008/09 the service specification will be reviewed and developed in line with pan-London guidelines for commissioning abortions.

**National Chlamydia Screening Programme**

The service was locally commissioned as part of collaborative commissioning arrangements across South West London (Croydon, Kingston, Wandsworth, Sutton & Merton and Richmond & Twickenham PCTs). The PCT employed a Chlamydia Screening Nurse Lead and held SLAs with the CSO and the PCT Provider Arm.

Chlamydia screening is included in both contracts with abortion providers. Treatment and management of patients and partners is undertaken by the South West London Chlamydia Screening Office.

In 2008/09 the chlamydia screening contract will be revised and a LES developed for general practice and chlamydia screening in pharmacies.

**Sexual “health services provided by GPs outside of the GMS contract**

The PCT had a LES contract (Park Road Surgery) to provide Level 1 and 2 services.

The PCT had a NES contract for IUD fitting with 26 GP Practices across Richmond & Twickenham.

**Pharmacy based services**

The contract provided free emergency hormonal contraception to 13-18 year olds as a pilot in 6 pharmacies across Richmond & Twickenham. The pharmacies were paid per consultation with no capping on numbers. This scheme started in January 2008.

**Locally-commissioned HIV and primary STI prevention**

Services were provided by:

**African Culture Promotions,** which provided a condom distribution scheme for businesses and social venues used by African communities in South West London.

**SHAKA “Badinnabed” project,** which delivered sexual health information in community settings and via specific events, targeting young African / African Caribbean communities via detached work. In 2008/09 the service is due for re-tender.

**THT,** Terrence Higgins Trust, delivered development work targeted at young gay men in order to support mainstream services in more effectively meeting the needs of the local gay population. In 2008/09 the service is due for re-tender.

**Family Support (Karibu)** delivered Family support services with direct referral to local authority services, family projects around education, disclosure, HIV in the family, stigma. summer play scheme, respite for carers, fathers group, outreach to hard to reach communities, families training course, young people’s HIV project. In 2008/09 the service is due for re-tender.

**South London HIV Partnership (comprises THT, The Positive Place, NAM, SLAM, NAW Solutions, Meganexus),** delivered advice and advocacy, counselling, emotional and peer support for people with HIV living in south London.

**Service networks**

The PCT engaged with its providers via the Sexual Health Implementation Group. Membership included health services, local authority, voluntary sector, and service user representatives. Meetings were held every quarter. The PCT SH Lead and sexual health providers also participated in a wide range of forums run by Teenage Pregnancy Partnership Board and SWAGNET.
The PCT engaged with service users in a variety of ways, including a sexual health open forum. There are locally well-established links with the local authority based youth participation lead who has coordinated mystery shopping of sexual health services and ran consultations with young people on sexual health. Young people have also assessed a select number of sexual health services as part of the pan-London ‘You’re Welcome’ quality criteria.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
- Primary care and GUM
- Contraceptive services and GUM
- NCSP and contraceptive services

Clinical network

The PCT's providers are members of SWAGNET. The clinical lead is Dr Paul Lister and the Network Manager is Janine Railton. SWAGNET is provider led but there is commissioner involvement. All 5 South West London PCTs contribute to the costs of SWAGNET.

Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting but does have plans to commission additional or new activity in a non acute setting.

New investment plans for 2008/09 include:

- Screening and advice for sexual health (SASH) Roehampton Clinic, Queen Mary’s Hospital - asymptomatic STI clinic run from Richmond Royal Rehabilitation Centre.

The PCT will invest in projects in the following areas: prevention, sexual health with young people, screening opportunities in the community and expansion of EHC scheme.
Southwark PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within commissioning. The interim Director of Commissioning has overall responsibility. The Sexual Health Commissioner leads on commissioning. This post is dedicated to sexual health commissioning across Lambeth and Southwark. In addition the post is responsible for commissioning London-wide HIV prevention and community support, and for commissioning these for South London and local populations.

Sexual health needs assessment

In 2006 the PCT undertook a comprehensive sexual health needs assessment in collaboration with Lambeth PCT as there are demographic similarities between the two boroughs and both boroughs worked closely to modernise sexual health services through the Sexual Health Modernisation initiative (SHMI) 2003-07.

The sexual health needs assessment provided the baseline epidemiological data of the numbers of STIs at GUM clinics as comparators to the rest of London and provided a baseline for sexual ill health in Southwark and identified target populations which included young people, MSM, black Africans and African Caribbean populations and young people.

The needs assessment has been an important part of the development of the Southwark sexual health strategy 2006-2008.

The PCT used findings as a basis for commissioning until publication of the Southwark sexual health strategy in 2006 which has since driven commissioning.

Sexual health strategy

In 2006 the PCT published a sexual health strategy. Its purpose was to create an integrated care pathway and continuum of services across prevention and health promotion. The strategy was developed by stakeholders including: Teenage Pregnancy Partnership (Southwark PCT and Southwark Council), Guys and St Thomas’ Trust (GSTT) Sexual Health Modernisation Initiative in partnership with Lambeth PCT, acute trusts, Kings and GSTT, voluntary sector organisations, Terrence Higgins Trust, Brook, community services and primary care.

The PCT has used the strategy to inform the location of new services and the targeting of specific groups and Commissioning Plans in 2007/08 and in 2008/09.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £7,028,858 which represented 1.58% of the total PCT budget.

Detailed service specifications were used for the commissioning the following: Brook and rapid HIV testing service.

GUM services

Services were provided by Kings College Hospital, at the Caldecot Centre at Levels 1, 2 and 3 and at Camberwell Sexual Health Centre at Levels 1 and 2. The Camberwell Sexual Health Centre also offered contraceptive / family planning services at Levels 1, 2 and 3.

Since April 2008 walk-in sexual health activity has been diverted to the new Community Sexual Health Centre in Camberwell. Kings are managing more specialised activity mainly via an appointment service.

In 2008/09 Camberwell Sexual Health centre will have a chlamydia target to screen 75% of 15-24 year olds registering with the service.
Community contraceptive / family planning services

Services were provided by the following:

Southwark PCT Provider Services (Southwark Reproductive Health Service - SRHS) delivered community contraceptive / family planning services at Levels 1, 2 and 3 and also delivered STI treatment and testing at Levels 1 and 2.

Kings College Hospital NHS Trust delivered contraception / family planning at Levels 1, 2 and 3. This was provided through a block contract.

In 2008/09 referral pathways will be developed for under 19s having abortions back to SRHS. In addition the service will have a chlamydia target to screen 75% 15-24 year olds who register with the service as new clients.

Other commissioned sexual health services

Brook London delivered Levels 1 and 2 contraceptive / family planning services and Levels 1 and 2 STI testing and treatment. In 2008/09 this provider will increase their opening hours to include a Saturday.

Abortion services

Services were provided by the following:

British Pregnancy Advisory Service. This contract was a cost and volume contract based on the previous year’s out-turn. The provider offered the following services; medical and surgical terminations up to 19 weeks and with PCT agreement a few late abortions to 23 weeks. The provider was also commissioned to provide contraception especially LARC. In 2007/08 BPAS provided 37% of the PCTs abortions. In 2008/09 the provider will offer chlamydia screening for self-referrals and referral pathways for under 19s back to community sexual health centres.

BPAS Central Booking Service. This service was commissioned as the central booking service for clinical referrals and self-referrals across Lambeth, Southwark and Lewisham PCTs. The service was promoted through sexual health access points including sexual health centres, GPs, Brook and community pharmacies. In 2008/09 the service will be re-tendered and a new provider will be in place by October 2008.

Marie Stopes International. This contract was a cost and volume contract with agreed activity levels based on the previous year’s out-turn. The provider offered the following services; medical and surgical terminations up to 19 weeks and with PCT agreement a few late abortions to 23 weeks. The provider was also commissioned to provide contraception especially LARC. In 2007/08 MSI provided 52% of the PCTs abortions. In 2008/09 the provider will offer chlamydia screening for self-referrals and referral pathways for under 19s back to community sexual health centres. In addition an opt out model of HIV testing with referral to GUM for results.

Kings College Hospital. The contract was a cost and volume contract. The provider offered procedures for those aged under 16 years, those requiring abortions over 19 weeks and for those clients at risk of complications during or after the procedure. In 2007/08 Kings College Hospital provided 11% of the PCTs abortions. In 2008/09 the provider will offer chlamydia screening for self-referrals and referral pathways for under 19s back to community sexual health centres and offering HIV opt-out model of testing with built in referral into GUM for results.

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between Lambeth and Southwark PCTs. The Chlamydia Screening Office coordinated training and development of screening sites in clinical and non-clinical settings. They also coordinated treatment of positive patients, signposting to treatment sites GPs, Community Sexual Health Clinics, community pharmacy (those that are contracted to treat) and Southwark RSH. Partner notification and treatment will take place in all the above and GUM.

In 2007/08 chlamydia screening was offered under a LES with 15 GPs across Southwark.
Practices offering this Level 2 Locally Enhanced Service were paid in recognition of all screening taking place outside of the 15 - 24 chlamydia screening programme and remunerated per patient screened.

There is a LES for community pharmacies to offer chlamydia screening, with remuneration offered per screen.

In 2008/09 community Reproductive Sexual Health Clinics have been assigned a target to screen 75% of newly registered 15 - 24 year olds. The CSP will offer on-going support to the pharmacy sites offering Level 1 Sexual Health services. In light of a review of the current GP LES for Level 1 services there are plans to amend the payment structure and to offer incentives per practice and to support screening through the use of a GP champion.

Sexual health services provided by GPs outside of the GMS contract

The PCT had the following contracts:

A LES for sexual health services in 15 practices at Level 1 which included chlamydia screening.

A LES for IUD fitting (Level 2) with 27 practices.

A LES for subdermal contraceptive implants (Level 2) with 5 practices.

Pharmacy based services

The PCT had the following contracts:

A LES for Level 1: emergency hormonal contraception, condoms, chlamydia screening in 33 pharmacies across Southwark

A LES for chlamydia treatment and C Card scheme with 6 pharmacies. The PCT were unable to provide financial information for this service.

Locally-commissioned HIV and primary STI prevention

There were collaborative commissioning arrangements between Southwark, Lambeth and Lewisham PCTs for HIV prevention. The budget split was based on SOPHID data with contributions as follows. Lambeth 47\%, Southwark 33\% and Lewisham 20\%. In addition local work was commissioned on a PCT wide basis.

Services were provided by:

**Women being concerned**, which delivered outreach, training workshops to African and Muslim communities.

**SHAKA**, which delivered a condom scheme in black Business and social venues.

**WANI**, which delivered outreach, workshops and training to West African communities.

**Neovenator**, delivered outreach, workshops and training to West African communities.

**AAF**, which delivered outreach, training and workshops to African and Muslim communities.

**AAF**, which delivered outreach and community mobilisation work with young people and support for parents, volunteering and 1:1 interventions to African and Muslim communities.

**AAF**, which delivered outreach, peer education re HIV, workshops and resource development to African men.

**UAAF**, which delivered outreach, community mobilisation, young peoples' activities for African Communities.

_All of the above services under went a re tendering process in the autumn of 2007._

_The PCT commissioned one off development work in 2007 from the following organisations:_

**Michael Bell Associates**, delivered an African communities HIV prevention programme.
SHAKA, which delivered health promotion training and capacity building skills for African CBOs.

Mainliners, which delivered intravenous drug user and working women’s outreach focussing on harm minimisation.

Metro, which delivered outreach to gay men.

ERGO, which worked with gay men contributing to the needs assessment.

Streetwise, which delivered outreach to male sex workers.

Development work with African CBOs.

Statutory contribution to HIV component of healthier schools.

Working Women’s Clinic.

Health Promotion materials.

Service networks

The PCT engaged with providers via the quarterly Termination of Pregnancy Pan Providers meeting, the quarterly Southwark Sexual Health Forum, the bi-monthly SE Sector HIV network, and the Lambeth and Southwark Sexual Health Network (Lashnet).

The PCT engaged with service users via the Mystery Shopping Programme developed by the GSTT SHMI, focus groups as carried out by the SHMI and client satisfaction surveys at service level. Healthfirst were commissioned through Southwark Social Services to undertake a service user feedback review primarily on LBS services for people living with HIV.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Community pharmacy and GUM
Voluntary sector and GUM

Clinical network

The PCT’s providers are members of a Sexual Health Clinical Network across SE London which will meet in June 2008. The SEL HIV network has been in operation since 2006.

Commissioning and NEW investment plans for 2008/09

The PCT has specific plans to shift existing activity out of an acute setting and to commission additional and new activity in a non acute setting. New investment plans for 2008/09 include:

Camberwell Sexual Health Centre, new vending machine and log in technology that facilitates self management pathways. A business case is being developed for commissioning of this service in 2009/10. The service is currently provided by Kings Hospital under a block contract.

NCSP chlamydia screening in primary care. Additional investment.

HIV Point of care Testing, at Peckham Pulse (run by THT).
General information

Within the PCT structure, responsibility for sexual health is shared between commissioning and public health. However, service development is carried out predominantly within the public health team. The Associate Director of Acute Commissioning and the Sexual Health Lead share responsibility for sexual health commissioning. 5% of the Associate Director of Acute Commissioning is dedicated to sexual health. Other responsibilities include management of all acute SLAs, including specialised commissioning. 25% of the Sexual Health Lead’s post is dedicated to commissioning. Other responsibilities include clinical support to women’s screening services, acting chlamydia delivery lead and nurse manager of family planning services.

Sexual health needs assessment

The PCT has not undertaken a health needs assessment.

Sexual health strategy

In 2007 the PCT published a sexual health strategy. This was informed by consultation with teenage pregnancy coordinators, public health, family planning services, acute GUM, pharmacy advisor, GPs, HIV nurse specialists and women and children’s services.

The strategy needs development into a more commissioning focussed document. It is due to be revised in 2010.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £2,581,227 which represented 0.52% of the total PCT budget.

Detailed service specifications were not used for commissioning.

GUM services

The hosted provider was Epsom and St Helier University Hospitals NHS Trust which delivered services at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3 was Sutton & Merton PCT Provider Services (Family Planning Services). In 2008/09 this provider will deliver chlamydia screening.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

Services were provided by the following:

BPAS. This contract was based on cost and volume with indicative costs (though not capped). The provider offered the following services; medical up to 19 weeks, medical induction up to 24 weeks, manual vacuum aspiration up to 10 weeks, local anaesthetic up to 14 weeks, general anaesthetic up to 19 weeks, conscious sedation between 14 - 24 weeks. In 2008/09 chlamydia screening will be introduced at time of procedure.

Marie Stopes International. This contract was based on cost and volume with indicative costs (though not capped). The provider offered the following services; medical up to 19 weeks, medical induction up to 24
weeks, manual vacuum aspiration up to 10 weeks, local anaesthetic up to 14 weeks, general anaesthetic up to 19 weeks, conscious sedation between 14 - 24 weeks. In 2008/09 chlamydia screening will be introduced at time of procedure.

**St Georges Hospital.** Patients also accessed termination services with this NHS acute provider.

**National Chlamydia Screening Programme**

There was a collaborative commissioning arrangement across 5 PCT’s in South West London: Sutton & Merton, Wandsworth, Croydon, Kingston and Richmond & Twickenham. The chlamydia screening programme office is jointly funded by the above PCTs and is hosted by Kingston PCT. For 2007-08 the office was funded by rolled over monies from the old South West London SHA so spending was initially low to support family planning services in the initial roll out period.

In 2008/09 the PCT plan to commission FPS, GPs, pharmacies and other providers to carry out NCSP screens via a Local Enhanced Service

**Sexual health services provided by GPs outside of the GMS contract**

In 2007/08 the PCT did not commission any services provided by GPs outside of the GMS contract.

**Pharmacy based services**

In 2007/08 the PCT did not commission any pharmacy based services.

**Locally-commissioned HIV and primary STI prevention**

The services listed below were commissioned on the PCT’s behalf by the Specialist Commissioning Group hosted for the South West London Sector by Croydon PCT.

Services were provided by:

**African Culture Promotions**, which provided condom distribution scheme for businesses and social venues used by African communities in South West London.

**SHAKA “Badinnabed” project**, which delivered sexual health information in community settings and via specific events, targeting young African / African Caribbean communities via detached work. In 2008/09 the service is due for re tender.

**THT**, Terrence Higgins Trust, which delivered development work targeted at young gay men in order to support mainstream services in more effectively meeting the needs of the local gay population. In 2008/09 the service is due for re tender.

**Family Support (Karibu)**, which delivered family support services to families affected by HIV including social work services, family projects around education, disclosure, stigma, a summer play scheme, respite for carers, a fathers group and outreach to hard to reach communities. In 2008/09 the service is due for re tender.

**South London HIV Partnership (comprises THT, The Positive Place, NAM, SLAM, NAW Solutions, Meganexus)**, which delivered advice and advocacy, counselling, emotional and peer support for people with HIV living in south London. The service was commissioned jointly with Croydon PCT.

**Service networks**

The PCT engaged with its providers via the Sexual Health Local Implementation Group (SHLIG) and via monthly performance and contract meetings with acute providers.

The PCT engaged with service users via surveys, verbal feedback from service users, reviews of complaints and via responses to PALS enquiries.
Referral pathways

Referral pathways were defined and agreed between the services identified below:
Contraceptive services and GUM
Voluntary sector and GUM
GUM and contraceptive services
Primary care and contraceptive services
NCSP and contraceptive services
NCSP and GUM

Clinical network

The PCT's providers are members of SWAGNET. The clinical lead is Dr Paul Lister and the Network Manager is Janine Railton. SWAGNET is provider led but there is no commissioner involvement. All 5 South West London PCTs contribute to the costs of SWAGNET.

The network is funded at sector level with funding received through the London HIV Consortium and through cross charging all the 5 PCTs in the sector.

Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting or to commission additional or new activity in a non acute setting.

New investment plans for 2008/09 include:

NCSP
SWL chlamydia screening programme office.
Staffing to support local delivery of chlamydia screening programme to include chlamydia screening delivery lead and increasing staffing capacity within family planning services.

Develop LES with pharmacists and GP.

Develop services in non-NHS venues to include youth venues, postal screening, educational settings.
Tower Hamlets PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits between Commissioning and Public Health. The Directors of Strategic Commissioning and Public Health share overall responsibility. The Associate Director of Public Health, the Associate Director of Primary Care Commissioning and the Sexual Health Commissioner lead on sexual health commissioning. Sexual health commissioning constitutes 60% of the Associate Director of Public Health’s post, 5% of the Associate Director of Primary Care Commissioning’s post and 100% of the Sexual Health Commissioner’s post.

The Associate Director of Public Health is the lead for joint commissioning arrangements for laboratory / IT services for the NCSP for Tower Hamlets and Newham PCTs. There were joint commissioning arrangements for HIV prevention between Newham and Tower Hamlets PCTs, which Tower Hamlets lead.

Sexual health needs assessment

In early 2008 the PCT commissioned a rapid sexual health needs assessment as part of the foundation phase of implementing the local sexual health strategy. There was also an audit of the GP sexual health LES in 2008.

The PCT will use findings to draw up a specification for community based sexual health services and determine where services should be located and the training and development needs of primary care.

Sexual health strategy

In 2007 the PCT published a sexual health strategy. The strategy was developed by stakeholders including: GP sexual health lead, the acute trust, voluntary organisations, Step Forward, Women and Young People’s Service, Public Health Directorate, Primary Care Directorate, Strategic Commissioning Directorate. The strategy will be due for revision in 2012.

The PCT has used the strategy to inform commissioning. The 5 year plan states specific time frames for delivery which facilitate commissioning to achieve them, an example being for all GPs to deliver Level 1 services by 2009 resulting in development of a sexual health LES and commissioning of STIF courses with clinical placements.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was approximately £8,298,653 which represented 2.02% of the total PCT budget.

Detailed service specifications were used for the commissioning the following: NCSP, HIV Prevention, Young People’s Sexual Health Clinics, chlamydia / sexual health LES.

GUM services

The hosted provider was Barts and the London NHS Trust at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2, 3 was Women and Young Peoples Service, part of Tower Hamlets PCT Provider services. Services delivered were as follows:

Sylvia Pankhurst Centre, Young People’s Sexual Health Clinics, Women’s Health
Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

Services were provided by the following:

Women and Young People’s Service, Tower Hamlets PCT Provider Services, via a block contract with the service. The provider offered medical and surgical terminations under 14 weeks. In 2007/08 WYPs provided 90% of the PCT's abortions.

Marie Stopes International. This contract was based on a cost per case for all patients over 14 weeks. In 2007/08 MSI provided 10% of the PCT's abortions.

National Chlamydia Screening Programme

The PCT commissioned the Women and Young People’s Service to deliver the NCSP for the Borough of Tower Hamlets from 2007 - 2010. WYPs delivered the service and sub-contracted Terrence Higgins Trust and Brook London and local pharmacies to help achieve the 15% national target.

Sexual health services provided by GPs outside of the GMS contract

The PCT had a sexual health LES at Levels 1 and 2 based on capped activity levels (minimum and maximum) with 27 practices across Tower Hamlets.

The PCT had a chlamydia LES for screening based on a cost per case basis with 20 practices across Tower Hamlets.

Pharmacy based services

The enhanced services contract provided emergency contraception in 32 of 43 community pharmacies in Tower Hamlets. In addition some pharmacies delivered chlamydia screening under contract with the WYPs.

In 2008/09 where possible the PCT plan to extend the EHC scheme to all pharmacies.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Five community based 3rd sector organisations (Positive East, Women’s Health and Family services Somali Education and Cultural Project, Somali Employment and Training Project /Ocean Somali Community Association, Widows and Orphans International) targeting primarily African communities and other groups including MSM.

Service networks

The PCT has engaged with its providers via the Sexual Health Strategy Group attended by a wide range of stakeholders which met every 6 - 8 weeks; the Teenage Pregnancy Steering Group which met every 6 weeks; the HIV Prevention Partnership jointly with Newham PCT and the Chlamydia Screening Group which met weekly.

The PCT engaged with service users via various focus groups for young people, questionnaires with service users and targeted prevention campaigns on teenage pregnancy and HIV prevention.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Primary care and GUM
Contraceptive services and GUM
Community pharmacy and GUM
Voluntary sector and GUM
Primary care and contraceptive services
Community pharmacy and contraceptive services
Voluntary Sector and contraceptive services
NCSP and contraceptive services
NCSP and general practice
NCSP and pharmacy
NCSP and GUM
Voluntary sector and NCSP

Clinical network

The PCT’s providers are members of the NE London HIV and Sexual Health Network. The clinical lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement.

Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting. New investment plans for 2008/09 include:

Eastside Community Project providing Level 1 / 2 services to young people in E3.

Teenage Pregnancy Project providing individualised packages to young women.

Chariots Sauna Project. Pilot for STI outreach screening for MSM.

HIV Point of care Testing.

Sexual Health Implementation Programme. 2 year programme to facilitate and help implement the sexual health strategy including needs assessments via a service improvement manager.
The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health is shared between commissioning and public health. The Director of Public Health has overall responsibility. The Chief Operating Officer is responsible for leading sexual health commissioning.

Sexual health needs assessment

The PCT has not undertaken a sexual health needs assessment.

Sexual health strategy

The PCT does not have a sexual health strategy.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £2,579,532 which represented 0.77% of the total PCT budget.

GUM services

The hosted provider of services was Whipps Cross Hospital at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Levels 1, 2 and 3. was Waltham Forest PCT Provider Services.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

The sole provider of services was Marie Stopes International. This was a fixed tariff contract. (The PCT did not provide information on services offered).

National Chlamydia Screening Programme

There were collaborative commissioning arrangements between Waltham Forest, Redbridge and Barking & Dagenham PCTs, led by the latter PCT. The 3 PCTs hold a single contract with the Chlamydia Screening Office, the commissioned provider being the Terrence Higgins Trust.

There was also a LES for GPs.

The Chlamydia Screening Office coordinated all screening and managed positive patients and partner notification. No incentives / remunerations were offered. Screening sites included: GP, young peoples sexual health services, family planning clinics and other young peoples services.

All chlamydia positive patients were risk assessed over the phone and referred to GUM clinics if appropriate.

In 2008/09 there will be a LES with GPs for chlamydia screening.
Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission any sexual health services provided by GPs outside of the GMS contract.

Pharmacy based services

In 2007/08 the PCT did not commission any pharmacy based services. In 2008/09 a contract for delivery of emergency hormonal contraception will be commissioned.

Locally-commissioned HIV and primary STI prevention

Services were provided by the following (however the PCT did not give details of for some of the activities commissioned):

London East AIDS Network.

Education Sexual Health delivered sex and relationships programmes in primary and secondary schools and alternative provisions.

Body and Soul

Men having Sex with Men

African Prevention

Treatment Information Providers

Service networks

The PCT engaged with its providers via the Local Sexual Health Network group that met bi-monthly. The network is chaired by the sexual health lead Director, who is the Director of Public Health. Membership included the PCT sexual health lead, representatives from the local GUM service, commissioners from the PCT, providers of the contraceptive and family planning service, local chlamydia screening programme and local Health Protection Unit representatives. Individual projects and programmes will also have smaller time limited working groups including commissioners and providers to develop performance management frameworks.

The PCT engaged with service users via focus groups and online surveys.

Referral pathways

Referral pathways were defined and agreed between the services identified below:
Contraceptive services and GUM
GUM and contraceptive services
Primary care and contraceptive services
Voluntary sector and contraceptive services
NCSP and general practice

Clinical network

The PCT’s providers are members of the NE London HIV and Sexual Health Network. The clinical lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement.

Commissioning and NEW investment plans for 2008/09

The PCT has no specific plans to shift existing activity out of an acute setting. New investment plans for 2008/09 include:

EHC in pharmacies (Level 1). The service will be available to all women but will focus on the under 25s and will work with under 16s. The service will be based in a number of pharmacies, but these have not yet been decided.
Increased provision of LARC. The service will be led by the community contraceptive service and will provide training for clinicians in insertion of all methods of LARC including IUCD.

Community based GU, (Level 3). There is a plan to develop addition GU capacity within the community. This will be provided by the current community contraceptive service. The service will initially be located in the current community contraceptive services building, but the plan is to roll out the service in 2009/10 to additional community locations.
Wandsworth PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, responsibility for sexual health sits with Public Health. The Director of Public Health has overall responsibility. The Assistant Director, Commissioning, leads on sexual health commissioning. The proportion of the post’s time dedicated to sexual health is 5-10%

Sexual health needs assessment

In 2005 the PCT collected data regarding key areas of need identified by the Sexual Health Implementation Group.

Sexual health strategy

The PCT published a sexual health strategy in March 2005. The following stakeholders were involved in its development: GUM consultants, contraceptive/family planning consultant, teenage pregnancy coordinator, chief pharmacist, practice nurses, locality managers, Deputy Director of Public Health, Deputy Director of Primary Care, Associate Director of Modernisation.

The strategy is due for revision in 2008 and was used as to develop a set of detailed sexual health commissioning intentions for 2008/09.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £7,583,908 which represented 1.73% of the total acute PCT budget.

Detailed service specifications were used for commissioning the following: abortion services

GUM services

The hosted provider was St Georges Healthcare NHS Trust which delivered services at Levels 1, 2 and 3.

Community contraceptive / family planning services

The sole provider of community contraceptive / family planning services at Level 1 was Wandsworth PCT Provider Services.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

Services were provided by:

Marie Stopes International. This was a block contract capped by money. The provider offered the following services: surgical abortions up to 23 weeks and 6 days. In 2007/08 MSI provided 19% of the PCTs abortions.

British Pregnancy Advisory Service. This was a block contract capped by money. The provider offered the following services: surgical abortions up to 23 weeks and 6 days. In 2007/08 BPAS provided 22% of the PCTs abortions.

St Georges Healthcare NHS Trust. This was a PbR contract. The provider offered the following services: medical and surgical abortions up to 23 weeks and 6 days. In 2007/08 St Georges Healthcare NHS Trust provided 59% of the PCTs abortions.
National Chlamydia Screening Programme

There were collaborative commissioning arrangements between South West London PCTs (Sutton & Merton, Wandsworth, Croydon, Kingston and Richmond & Twickenham) which commissioned one Chlamydia Screening Office. Screening took place in a number of sites including family planning clinics and via GPs and pharmacies through LES contracts. Treatment and management of patients and partners was commissioned through the Family Planning Service and GUM.

In 2008/09 the PCT are considering a competitive tendering process to purchase additional screening capacity.

Sexual health services provided by GPs outside of the GMS contract

The PCT had a GPSI Level 3 services.

The PCT had two PMS practices offering Level 2 services.

Pharmacy based services

A LES contract provided emergency hormonal contraception in 29 Pharmacies across the PCT.

In 2008/09 the age range has changed from 13-19 year olds to anyone over the age of 13 years.

Locally-commissioned HIV and primary STI prevention

There were collaborative commissioning arrangements with other South West London sector and South London PCTs.

Services were provided by:

South London HIV Partnership (comprises THT, The Positive Place, NAM, SLAM, NAW Solutions, Meganexus), which delivered advice and advocacy, counselling, emotional and peer support for people with HIV living in south London. The service was commissioned jointly with other South West and South London PCTs.

Family Support (Karibu), which delivered family support services to families affected by HIV including social work services, family projects around education, disclosure, stigma, a summer play scheme, respite for carers, a fathers group and outreach to hard to reach communities. The service was commissioned jointly with other South West and South London PCTs. In 2008/09 the service is due for re tender.

African Culture Promotions, which provided a condom distribution scheme for businesses and social venues used by African communities in South West London. The service was commissioned jointly with other South West and South London PCTs.

SHAKA “Badinnabed” project, which delivered sexual health information in community settings and via specific events, targeting young African / African Caribbean communities via detached work. The service was commissioned jointly with other South West and South London PCTs. In 2008/09 the service is due for re tender.

THT, Terrence Higgins Trust, which delivered development work targeted at young gay men in order to support mainstream services in more effectively meeting the needs of the local gay population. The service was commissioned jointly with other South West and South London PCTs. In 2008/09 the service is due for re tender.

Service networks

The PCT engaged with its providers via quarterly meetings of the Sexual Health Advisory Group (SHAG) which included all sexual health providers within Wandsworth PCT. The Teenage Pregnancy Group led by the Council but which also included provider and public heath representation. The South West London Sector wide meetings include the South West London GUM Network (SWAGNET) and its sub groups which were predominantly provider led. In addition there is a South West London wide Sexual Health Expert Advisory Group (SHEAG) which included representation from commissioners and providers.
The PCT has not engaged with service users.

**Referral pathways**

Referral pathways were defined and agreed between the services identified below:

Voluntary sector and GUM

**Clinical network**

The PCT’s providers are members of SWAGNET. The clinical lead is Dr Paul Lister and the Network Manager is Janine Railton. SWAGNET is provider led with commissioner involvement. All 5 South West London PCTs contribute to the costs of SWAGNET.

The network is funded at sector level with funding received through the London HIV Consortium and through cross charging all the 5 PCTs in the sector. Each PCT contributes on a population prevalence basis as per SOPHID calculations.

**Commissioning and NEW investment plans for 2008/09**

The PCT has specific plans to shift existing activity out of an acute setting. New investment plans for 2008/09 include:

- **NCSP**, expansion of the programme.
- **emergency hormonal contraception**, expansion of provision.
- **LARC provision in primary care**.
- **New model of community sexual health provision**, in community sexual health clinics.
- **Teenage Pregnancy Services**.
Westminster PCT

The information in this data sheet was provided by the PCT through its response to the commissioning questionnaire. The PCT was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Within the PCT structure, sexual health sits within commissioning. The Director of Service Development has overall responsibility. The Service Development Manager (Sexual Health and HIV) is responsible for sexual health commissioning. This post is dedicated to sexual health and included some lead commissioner responsibilities for NW London voluntary sector services, and as host commissioner for Westside Contraceptive Services which covers 3 PCTs (Kensington & Chelsea and Hammersmith & Fulham and Westminster PCTs).

Sexual health needs assessment

The PCT undertook a service targeted sexual health needs assessment in 2007. The Sexual Health Best Value review looked at the need for clinical sexual health services (HIV, STI, contraception and abortion) and made recommendations for the future of these services. This is being added to in 2008 through the Joint Strategic Needs Assessment which will identify further prevention / health promotion needs.

SLAs are being adjusted in 2008/09 to take into account findings of the Best Value Review - particularly with regard to user involvement, developing combined STI and contraception services and improving data collection. Findings and recommendations from the Best Value Review were used to inform the PCT strategy to develop essential and enhanced sexual health services in general practice and community pharmacy. The current needs assessment being undertaken in 2008/09 will be used as a basis for re-tendering voluntary sector HIV services and for commissioning more health promotion / prevention services - all in time for financial year 2009/10.

Sexual health strategy

In 2004 the PCT published a sexual health strategy, which was updated in 2006. This was developed with a number of stakeholders including acute trusts, public health, SRH services, voluntary and community organisations, the local authority and user groups.

The strategy is used as a basis for commissioning by identifying priorities which then inform the development of SLAs.

The strategy is due for revision in the summer of 2008, in the form of the health promotion strategy and the sexual health commissioning intentions which will be part of the Joint Commissioning Framework.

Sexual health services commissioned in 2007/08

The PCT annual spend on commissioned sexual health services as itemised below (excluding specialised HIV treatment and care) was £7,381,362 which represented 1.84% of the total PCT budget.

Detailed service specifications were used for commissioning the following services: GUM (London agreed specification), SRH (locally developed specification - with Kensington & Chelsea and Hammersmith & Fulham PCTs), chlamydia screening (locally developed specification - with Kensington & Chelsea and Hammersmith & Fulham PCTs), Abortion (currently under development in line with London guidelines), Voluntary sector services (standard Westminster PCT specification adapted over time but being developed to have more outcome focus in line with re-tendering ready for 2009/10).

GUM services

The hosted provider of GUM services at Levels 1, 2 and 3 was Imperial Healthcare Trust, St Mary’s Hospital. In 2008/09 work will be done to unpick historical funding arrangements for non-PbR services, eg, support for sex workers and some outreach. These will then be commissioned using a new SLA.
Community contraceptive / family planning services

The sole provider was Westside Contraceptive Services which delivered Levels 1, 2 and 3 contraceptive / family planning services. In 2008/09 this provider will take over the chlamydia screening contract.

Other commissioned sexual health services

In 2007/08 the PCT did not commission any other sexual health services.

Abortion services

Services were provided by the following:

Chelsea & Westminster Hospital. This was a PbR contract.

St Mary’s Hospital. This was PbR contract.

British Pregnancy Advisory Service This was indicative volume contract.

Marie Stopes. This was indicative volume contract.

National Chlamydia Screening Programme

The PCT, together with Hammersmith & Fulham and Kensington & Chelsea PCTs, collaboratively commissioned the Chlamydia Screening Programme from Chelsea & Westminster Hospital. The programme was transferred in-year to a new provider (Westside Contraceptive Services) in January 2008.

In 2008/09 the PCT plans to deliver chlamydia screening as an enhanced service in general practice and community pharmacy.

Sexual health services provided by GPs outside of the GMS contract

In 2007/08 the PCT did not commission any sexual health services provided by GPs outside of the GMS contract.

Although some GP practices, particularly those attached to Universities in the PCT, provide sexual health services, the PCT does not currently fund these as an enhanced service. This will be developed in 2008/09.

Pharmacy based services

An emergency hormonal contraception pilot was funded through public health and involved 10 pharmacies providing free EHC to 13-19 year olds.

In 2008/09 the PCT plans to develop more services through pharmacies.

Locally-commissioned HIV and primary STI prevention

Services were provided by:

Rain Trust - to provide HIV prevention work, condom distribution and safer sex advice to African communities, particularly male. In 2008/09 the budget will be increased by 2.3% pending review and re-tendering in 2009/10.

Youth Projects International - to provide HIV prevention work, condom distribution and safer sex advice and chlamydia screening to young Africans. In 2008/09 the budget will be increased by 2.3% pending review and re-tendering in 2009/10.

SW5 (Streetwise), Terrence Higgins Trust - to provide support services to male sex workers. In 2008/09 the budget will be increased by 2.3% pending review and re-tendering in 2009/10.
CLASH - to provide safer sex support, links to services, outreach, HIV prevention and advocacy to male and female sex workers. In 2008/09 the budget will be increased by 2.3% pending review and re-tendering in 2009/10.

Brook London - to provide outreach work with homeless young people.

Naz Project, London - to provide health promotion to south Asian and African people and particularly MSM. In 2008/09 this contract will be reviewed.

THT HIV testing for African communities (Outreach). In 2008/09 this service is to be expanded.

SW5 (Streetwise), Terrence Higgins Trust - to provide support services to male sex workers.

Westminster PCT (Public Health) - funding towards post of Young Persons Health Promotion Adviser to work with services to improve access for young people and carry out HP activity. Includes piloting You’re Welcome criteria, linking with the teenage pregnancy partnership and user involvement. In 2008/09 this will continue and be expanded with another post developing SRE outreach to schools and youth centres.

Bedroom Business - to develop a website and provide DVDs, training packs and events for young people.

Service networks

The PCT engaged with providers via the Sexual Health Strategy Group, which met quarterly and reported into the Joint Health and Care Network. It has a wide membership, including users. The HIV Partnership Group met quarterly, and reports into the Sexual Health Strategy Group. Membership included local authority representation and users. Commissioners also attend the first part of the Sexual Health Providers Forum, run in conjunction with Kensington & Chelsea PCT.

The PCT engaged with users in several ways. The Westminster HIV Users Forum, which is now funded as a stand alone organisation, works as a network of HIV positive people. The forum also works with the Council. PCT priorities for joint work include HIV needs assessment and service re-tendering, increasing levels of HIV testing, developing shared care arrangements with GPs. The PCT also works with the Patients’ Fora at Chelwest and Imperial (St Mary’s) and they are members of both the Westminster Users Forum and the HIV Partnership Group.

The PCT developed a Mystery Shopping project as part of the Best Value Review and has secured funding to develop this further as a service quality improvement tool for all services. It is included in all clinical services’ SLAs as a requirement, as is to demonstrate that users are involved in service redesign and the co-production of new services.

The PCT conducted focus groups with users as part of the BVR and all the above have and will continue to feed into the PCT’s new service model which will inform all future commissioning decisions.

Referral pathways

Referral pathways were defined and agreed between the services identified below:

Primary care and Gum
Contraceptive services and GUM
GUM and contraceptive services
Primary care and contraceptive services
NCSP and contraceptive services
NCSP and general practice
NCSP and Pharmacy
NCSP and GUM
Voluntary sector and NCSP

Clinical network

The PCT is part of the North West London Sexual Health and HIV Network. Dr Gary Brook is the Clinical Lead (NWL Hospitals Trust) and Melanie Britton is the Network Manager. The network is provider led with commissioning involvement.
All NW London PCTs contribute equally to the funding of the network. The network will be reviewed in 2008/09 and this will inform its future focus and funding needs. Westminster PCT will be leading this.

Commissioning and NEW investment plans for 2008/09

The PCT has plans to shift existing activity out of an acute setting. It also has plans to commission additional and new activity in a non acute setting.

The PCT service model involves gradually shifting basic sexual health activity to primary care and other community settings. One of the PCT’s acute providers has plans to open a sexual health centre in commercial premises in Soho early in 2009. The PCT will be agreeing essential and enhanced services in community pharmacy and general practice this year with a development worker to support this, and will expect providers to move towards increased self management for common sexual health problems and to move towards combined STI and contraception services.

New investment plans for 2008/09 include:

**Primary care development** - funding to be secured for enhanced services in GP and CP to carry out a comprehensive sexual health needs assessment.

**Change management** - The PCT plans to improve the abortion pathway, information and access, data collection and develop shared care for HIV positive people.

**Promotion of HIV testing**

**Chlamydia screening**

**User involvement**

The PCT will invest further resources as they become clearer about any risks posed by PbR / dehosting and any potential savings to the PCT from unpicking block contracts and historical funding arrangements with trusts. This will include more investment in prevention / health promotion.
London GUM Services

Camden PCT Provider Services
Archway Sexual Health Clinic

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Archway Sexual Health Clinic is part of Camden PCT Provider Services. The service is consultant led. It was funded by a block contract in 2007/8 by Camden PCT and from 2008/9 moved to PbR with the usual London billing arrangements. Service level agreements relating to activity are in place.

Access

The services have their doors open for 41.5 hours per week. Of these hours, 1.5 are provided after 7.00pm.

The service offers access by appointments. However walk-in patients are triaged and seen as required either as an extra (if an emergency) or by booking in to the next available slot. Nearly all patients are offered appointments on the same day. The service does not close to patients due to pressure of numbers.

In 2007/08 95% of patients self-referred, <2% were referrals from primary care, <1% referrals from secondary care, <1% referrals from voluntary / third sector agencies and <1% were referrals from outreach services and private clinics.

The service is advertised in service leaflets, in the local press, on websites, in yell.com, by THT, GMFA, fpa, BASHH, nhs.uk and has its own marketing website www.londonSTItesting.nhs.uk.

Activity

In 2007/08 there were 18,196 attendances at the service. Of these 14,153 were new / first attendances, and of these 49% were under 25 years. The new to follow-up ratio was 1:0.22

The DNA rate in 2007/08 for new appointments was 16% and for follow-up appointments was 19%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnet</td>
<td>7%</td>
</tr>
<tr>
<td>Camden</td>
<td>17%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>4%</td>
</tr>
<tr>
<td>Enfield</td>
<td>4%</td>
</tr>
<tr>
<td>Haringey</td>
<td>26%</td>
</tr>
<tr>
<td>Islington</td>
<td>35%</td>
</tr>
<tr>
<td>Waltham Forest</td>
<td>1%</td>
</tr>
<tr>
<td>Other PCTs</td>
<td>6%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are not considered ‘fit for purpose’. The space is not able to cope with demand for services despite numerous modernisation initiatives. New premises are being sought.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: Barnardo’s Young Women’s Project
- Contraception outreach
- Specialist services for ‘at risk’ groups: young people, and vulnerable and at risk young women
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Specialist clinics for complex GUM patients: complex wart treatments, vulval clinic, sexual health psychology clinics, male pelvic pain and prostatitis, genital biopsy clinics, joint GUM consultant/clinical psychology clinics.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>50%</td>
<td>30%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>0%</td>
<td>5%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>15%</td>
</tr>
</tbody>
</table>
While the service does not provide chlamydia screening as part of the NCSP, 100% of staff is trained to provide treatment as part of the NCSP.

Clinical network

The service is a member of the North Central Sector Network. Dr Eva Jungman is the Clinical Lead. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Undergraduate training for students from UCL
- ST 1-3 and GPVTS training
- In-house training for medical staff

The service provides the following nursing training:

- Undergraduate nursing placements
- In-house training for nurses
- Foundation Sexual Health Course in conjunction with Middlesex University

The service receives no funding for these.

The service also provides:

- 2 hours a week protected time for in house training / audit presentations for all clinical staff.

Service changes

In 2008/09 the service will receive new investment for the following:

- Online booking and registration system
- HIV 60 second point of care testing
- SMS results service
- Electronic patient record implementation
- Service relocation
Barnet and Chase Farm NHS Trust  
GUM service  
Clare Simpson Clinic

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Barnet PCT GUM service (Clare Simpson Clinic) is part of Barnet & Chase Farm NHS Trust. The service is consultant led and was funded via Barnet PCT on a block contract in 2007/08 but will be funded on PbR in 2008/09.

Access

The service has its doors open for 41 hours per week and delivered services in a variety of settings.

The service offers mixed access with 60% of clinics being walk-in and 40% being ‘appointment clinics’. The service sometimes closes to patients (turns patients away). This occurs once every three to four months due to staff sickness and heavy demand. Patients are triaged and emergency / urgent patients are always seen. In 2007/08 298 patients were turned away but all were offered services within 48 hours, of these approximately 5% did not return.

In 2007/08 it is estimated that 60% of patients self-referred, 20% were referrals from primary care, 15% referrals from secondary care and 5% referrals from social services, the police and schools.

The service is advertised in service leaflets, on Barnet PCT website, on the Barnet & Chase Farm NHS Hospital website, via NHS Direct, via local GPs and in the local cinema magazine.

Activity

In 2007/08 there were 9,633 attendances at the service. Of these 70% were new / first attendances. The service was unable to provide the % of these that were under 25 years. The new to follow-up ratio was 1:0.4.

The DNA rate for new appointments in 2007/08 was 3% and follow-up appointments was 11%.

In 2007/08 % attendance by PCT of residence is listed below (note for 25% of patients the PCT of residence was unassigned):

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.03%</td>
</tr>
<tr>
<td>Barnet</td>
<td>46%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.03%</td>
</tr>
<tr>
<td>Brent</td>
<td>1.08%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.1%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.35%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.2%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.13%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.13%</td>
</tr>
<tr>
<td>Enfield</td>
<td>10.3%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.02%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.08%</td>
</tr>
<tr>
<td>Haringey</td>
<td>2.25%</td>
</tr>
<tr>
<td>Harrow</td>
<td>2.02%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.02%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2

- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive implant insertion and removal
- Symptomatic STI testing and treatment (men & women)

Level 3

- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: listed below
- Specialist services for ‘at risk’ groups: commercial sex worker clinic and outreach service; young persons clinic and outreach service; drug and alcohol service
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Highly specialised contraception: for HIV families
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault service

The service also provides specialist clinics for complicated GUM / antenatal STIs and prostatitis and weekly psychology clinics.

Staff

All staff have contracts solely with the service, with the exception of the Youth Outreach post which is shared with Barnet CRASH service and the Barnet Drug and Alcohol service.
The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>33%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>50%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>50%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>50%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>50%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North Central London Sexual Health Network. Dr Eva Jungmann is the Clinical Lead. There is commissioning involvement in the network.

Education and Training

The service provides the following medical training:

- Doctors from other specialties
- SHO VTS rotation and clinical assistant training
- Undergraduate medical placements
- Outreach training to enhanced GP practices

The trust receives funding for medical training.

The service provides the following nursing training:

- Pre-registration placements for student nurses
- Post-registration in house training for staff, placements for community staff, family planning training

The trust receives funding for nursing training.

The service also provides training for:

- STIF Course
- Training for midwives around HIV and STIs
- Training for the community CNS HIV team
- Training in working with young people

The service provides clinical governance to enhanced GP services and advice to the local NCSP.

Service changes

In 2008/09 the service will receive increased funding to:

- Install and implement a new IT system.
- Introduce MSM clinics and expand evening clinic sessions at Clare Simpson Clinic and possibly new community sites.
- Implement a joint GUM / family planning outreach project. Investment to be confirmed.
Service gaps / constraints include:

- IT system
- IT manager
- Senior nurses
Barts and the London NHS Trust
GUM services
Ambrose King Centre and Barts Sexual Health Centre

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Tower Hamlets PCT GUM service (Ambrose King Centre and Barts Sexual Health Centre) is part of Barts & The London NHS Trust. The service is consultant led and was funded via Tower Hamlets PCT on a block contract (based on 2004/05 activity) and partial PbR (for activity above the 2004/5 baseline) in 2007/08 but will be funded on PbR in 2008/09. Outreach activities are funded via SLAs with the host PCTs (ie Tower Hamlets and City & Hackney PCTs).

Access

The services have their doors open at: Ambrose King Centre for 49 hours per week and at Barts Sexual Health Centre for 36 hours per week. Of these hours, 2 are after 7.00pm at the Ambrose King Centre and 2 are after 7.00pm at Barts Sexual Health Centre.

The service offers mixed access: at the Ambrose King Centre 90% of clinics are ‘walk-in’ and 10% appointments for specialist clinics and at Barts Sexual Health Centre 90% of clinics are ‘walk-in’ and 10% ‘appointment clinics’. The service does not cap numbers but offers a slot system that evens out demand surges during the day. In extreme circumstances the doors may have to shut early (this occurred once in 2007/08). Data is not collected on patients ‘turned away’. Particular groups of people are fast tracked through the clinic at all times, these include: under 16s, commercial sex workers, sexual assaults and patients requiring post HIV exposure prophylaxis.

In 2007/08 it is estimated that 92% of patients self-referred, 5% were referrals from primary care, 1% referrals from secondary care and 2% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets, on Barts and the London NHS Trust, via NHS Direct, through Tower Hamlets PCT Health Promotion department and via voluntary organisations.

Activity

In 2007/08 there were 50,770 attendances at the service. Of these 32,730 were new / first attendances, and of these 31.8% were under 25 years. The new to follow-up ratio was 1: 0.6.

The DNA rate for new appointments in 2007/08 was 22% and follow-up appointments was 30%.

In 2007/08 % attendance by PCT of residence is listed below (note for 25% of patients the PCT of residence was unassigned):

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>2%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.6%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.8%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.4%</td>
</tr>
<tr>
<td>Camden</td>
<td>1.7%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>10.3%</td>
</tr>
<tr>
<td>Corydon</td>
<td>0.4%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.4%</td>
</tr>
</tbody>
</table>
The service is delivered from premises that are considered ‘fit for purpose’ but the Ambrose King Centre is not modernised and does not provide an appealing environment for patients.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive implant insertion and removal
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: Step Forward, a service for under 25s provided jointly with Tower Hamlets Connexions weekly; Chariots Saunas in Limehouse and Shoreditch service provided jointly with THT weekly; street outreach for CSW weekly; outreach clinic for CSW weekly
- Specialist services for ‘at risk’ groups: including gay men, commercial sex and young people
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Highly specialised contraception
- Difficult IUD insertion and removal
• Difficult implant removal
• Specialist HIV treatment and care
• Psychosexual / erectile dysfunction service
• Provision and follow-up of post exposure prophylaxis for HIV
• Sexual assault services

The Haven also provides specialist sexual assault services. Comprehensive psychology services are provided.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>65%</td>
<td>65%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>65%</td>
<td>65%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>2%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>5%</td>
<td>5%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>65%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North East London Sexual Health Network. Dr Celia Skinner is the Clinical Lead and Tracy Stannard is the Network Manager. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

• Coordinate the East London SpR rotation with 10 trainees
• Post graduate training for FY2, ST1 and ST2 (general medicine and GP)
• Overseas graduates completing DipGUM
• Undergraduate medical training for Queen Mary’s University

SIFT funding is included in the baseline budget although the amount is unclear.

The service provides the following nursing training:

• Pre-registration placements for student nurses
• Post-registration in house and local sector clinical training
• Dark field microscopy training via BASHH course (for all professional groups)

The trust receives funding for nursing training. Individual fees via BASHH course.

The service also provides:

• STIF Course and clinical placements for GPs, practice nurses, pharmacists and others

Tower Hamlets PCT (THPCT) provide funding for STIF training for THPCT GPs and other staff.
Service changes

Barts and the London NHS Trust have a commitment to service transformation under LEAN and the two sexual health services (walk-in) have been one of the pilot projects with events being undertaken to look at improving access to the services and reducing waiting times.

In 2008/09 the service will receive increased funding to:

- Provide a gay man’s outreach clinic at Chariots of Shoreditch building on the service already delivered in the Chariots Sauna in Limehouse. This is run jointly with the Terrence Higgins Trust.

Service gaps / constraints / plans include:

- The infrastructure at the Ambrose King Centre with limited investment due to trust PFI new build. The clinic will move to new premises in 2014.
- Clinical care: a business case is currently with pathology services to introduce point of care testing for HIV in both clinics and in appropriate outreach work
- IT - the plan is to introduce electronic patient records in both clinics within the next two years in a move to becoming paperless
Bromley Hospitals NHS Trust
Beckenham Hospital GUM Clinic

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Beckenham Hospital GUM Clinic is part of Bromley Hospitals Trust. The service is consultant led and was funded by Bromley PCT on PbR in 2007/08. There is a service level agreement in place relating to activity for 2008/09.

Access

The service has its doors open for 31 hours per week. Of these 31 hours, 1 is after 7.00pm.

The service offers mixed access: with 70% of clinics being ‘walk-in’ and 30% appointments. The service caps numbers at walk-in clinics by only giving out a certain number of tickets. Once these are all gone patients are triaged and emergency patients are seen. The service sometimes has to close to patients (turn patients away) when there are staff shortages. The service does not collect data on patients turned away.

In 2007/08 it is estimated that 73% of patients self-referred, 22% were referrals from primary care, 2% referrals from secondary care and 3% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets, by GPs, on the Bromley Hospitals Trust website, in the Contraceptive and Reproductive Health services and via school nurses.

Activity

In 2007/08 there were 9,376 attendances at the service. Of these 5,996 were new / first attendances of these 53% were under 25 years. The new to follow-up ratio was 1:0.36

The DNA rate for follow-up appointments was 29%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bexley</td>
<td>1.2%</td>
</tr>
<tr>
<td>Bromley</td>
<td>70.8%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.01%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.04%</td>
</tr>
<tr>
<td>Corydon</td>
<td>7.4%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>1.3%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.01%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.01%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.03%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>0.04%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>0.8%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>13.3%</td>
</tr>
<tr>
<td>Newham</td>
<td>0.1%</td>
</tr>
<tr>
<td>Redbridge</td>
<td>0.03%</td>
</tr>
<tr>
<td>Southwark</td>
<td>0.5%</td>
</tr>
<tr>
<td>Sutton &amp; Merton</td>
<td>0.3%</td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>0.04%</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>0.1%</td>
</tr>
<tr>
<td>Outside London</td>
<td>2.8%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Specialist services for ‘at risk’ groups: young people
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Provision and follow-up of post exposure prophylaxis for HIV

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>20%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>50%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the South East London Sexual Health Network. Dr Michael Brady is the Clinical Lead. The network is provider led and has commissioning involvement.
Education and Training

The service provides the following medical training:

- FY2 trainees taster week training

The service receives no funding for this.

The service provides the following nursing training:

- Pre-registration placements for student nurses and midwives

The trust receives no funding for this.

The service also provides:

- STIF Course
- Clinical placements for GPs, practice nurses

The service receives no funding for these.

Service changes

In 2008/09 the service will move to new premises as part of a LIFT programme.

Service gaps / constraints / plans include:

- The desire to provide more contraception particularly in for young people as part of a one stop shop model but has no funding for this.
- IT - no funding for electronic patient records
- No funding for storage of old notes
Barking, Havering & Redbridge Hospitals NHS Trust
GUM services
Sydenham Centre and Queens Hospital

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Sydenham Centre is part of Barking, Havering and Redbridge Hospitals Trust (BHRT). The service is consultant led and was funded via Barking & Dagenham, Havering and Redbridge PCTs. In 2007/08 Barking & Dagenham funded the service via PbR while the other PCTs funded via partial PbR. In 2008/09 Barking & Dagenham PCT will be the lead commissioner and an SLA will be in place for activity. The trust has just been awarded the contract (through a competitive tendering process) to deliver an integrated sexual health service across the three PCTs with effect from September 2008.

Access

The services have their doors open 45 hours per week. Of these hours, none are after 7.00pm or at weekends. From September 2008 the service will increase opening hours at Queens Hospital and open a new Saturday morning clinic.

The service offers mixed access with 50% of clinics being ‘walk-in’ and 50% appointments. The service caps numbers attending the ‘walk-in clinics’ depending on staffing levels. At Queens Hospital the service regularly has to close to patients (turn patients away), however they are hoping to address this by increasing the sessions there. The service collects data on patients it turns away and in 2007/08 this was between 20-30 patients per week. Of these 10-20 were subsequently seen in the service. All patients are triaged and emergency patients are seen.

In 2007/08 it is estimated that 95% of patients self-referred, 3% were referrals from primary care, 1% referrals from secondary care and 1% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets, on the BHRT website and via NHS Direct.

Activity

In 2007/08 there were 13,982 attendances at the service. Of these 7,939 were new / first attendances. The service could not calculate the % that were under 25 years. The new to follow-up ratio was 1:0.4

The DNA rate for new appointments in 2007/08 was 11%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>45%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.04%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.05%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.12%</td>
</tr>
<tr>
<td>Corydon</td>
<td>0.01%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.4%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.15%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.05%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.4%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.01%</td>
</tr>
<tr>
<td>Havering</td>
<td>13%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.06%</td>
</tr>
<tr>
<td>Area</td>
<td>Percentage</td>
</tr>
<tr>
<td>-----------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Islington</td>
<td>0.01%</td>
</tr>
<tr>
<td>Kingston</td>
<td>0.01%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>0.11%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>0.12%</td>
</tr>
<tr>
<td>Newham</td>
<td>3.7%</td>
</tr>
<tr>
<td>Redbridge</td>
<td>30%</td>
</tr>
<tr>
<td>Southwark</td>
<td>0.15%</td>
</tr>
<tr>
<td>Sutton &amp; Merton</td>
<td>0.07%</td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>0.5%</td>
</tr>
<tr>
<td>Waltham Forest</td>
<td>1%</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>0.07%</td>
</tr>
<tr>
<td>Westminster</td>
<td>0.02%</td>
</tr>
<tr>
<td>Outside London</td>
<td>3.8%</td>
</tr>
</tbody>
</table>

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. There is a significant shortage of clinical space and the building is due to be demolished.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- IUD insertion and removal
- Contraceptive implant insertion and removal
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Specialist services for ‘at risk’ groups
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Highly specialised contraception
- Difficult IUD insertion and removal
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff. However from 1 September 2008 all community family planning doctors and nurses will transfer to the employ of BHRT as part of the integrated sexual health service.

The % of staff within the service trained in providing contraception is as follows:
The service provides the following medical training:

- Clinical training for GPs, family planning doctors and new hospital

The service receives no funding for this.

The service provides the following nursing training:

- Post-registration training for nurses attending South Bank University

The service receives no funding for this.

In 2008/09 the service will also provides:

- STIF Course

The sexual health service will be managing and providing governance for the family planning services across the three PCTs from September 2008.

Service changes

In 2008/09 the service plans to develop a service for commercial sex workers, MSM and increase clinical sessions for young people.

Having just won the tender to deliver services BHRT are in consultation with the PCTs and user groups regarding the redesigning of services to improve services.
King’s College Hospital NHS Foundation Trust  
GUM services  
Caldecot Centre for Sexual Health and HIV

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Caldecot Centre is based at King’s College Hospital. The service is consultant led and commissioned by Southwark PCT. It was funded by PbR 2007/8 onwards.

Access

The services have their doors open for 40 hours per week. Of these hours, 2 hours are provided after 7 pm.

The service offers access by walk-in only. The service does not cap patient numbers. The service closes its doors approximately once or twice a week for an average of 6 hours per week. The decision is made by senior nursing staff and the service manager. Data is collected on patients ‘turned away’; in 2007/8 524 were affected, approximately 236 of whom were subsequently seen in the service. Emergency patients are fast tracked through the service.

In 2007/08 it is estimated that 97% of patients self-referred, 1% were referrals from primary care, 1% referrals from secondary care and 1% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets and on websites.

Activity

In 2007/08 there were 21,310 attendances at the service. Of these 16,415 were new / first attendances, and of these 32.6% were under 25 years. The new to follow-up ratio was 1:0.29

The DNA rate for follow-up appointments in 2007/08 was 43%

In 2007/08 attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.2%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.05%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.3%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.2%</td>
</tr>
<tr>
<td>Bromley</td>
<td>2.1%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.2%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.2%</td>
</tr>
<tr>
<td>Croydon</td>
<td>3.8%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.05%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.1%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>1.5%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.1%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.1%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.05%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.05%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.05%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0.05%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.2%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>0.1%</td>
</tr>
</tbody>
</table>
Kingston 0%
Lambeth 34.6%
Lewisham 17.8%
Newham 0.1%
Redbridge 0.05%
Richmond & Twickenham 0.2%
Southwark 34.4%
Sutton & Merton 0.7%
Tower Hamlets 0.1%
Waltham Forest 0.05%
Wandsworth 1.2%
Westminster 0.1%
Outside London 1%

Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: weekly STI services at Brixton Prison, CSW with the trust, outreach to disadvantaged teenage mothers with St Michael’s, local schools and colleges
- Specialist services for ‘at risk’ groups: MSM, young people
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service (limited)
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Specialist clinics for complex GUM patients

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>60%</td>
<td>50%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>0%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Implant fitting and / or removal  25%  0%
IUD fitting and / or removal  10%  0%

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>67%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>72%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the South East London Sexual Health Network. Dr Michael Brady is the Clinical Lead. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Undergraduate training for students
- Postgraduate training for various grades of junior doctors
- STIF training for primary care

SIFT funding is received by the trust for medical training. SIFT funding is provided by the PCT

The service provides the following nursing training:

- Post e registration placements for nurses from the Florence Nightingale School of Nursing and Midwifery
- In-house training for nurses and local RSH nurse

Lambeth and Southwark PCTs coordinate training and teaching for local primary care professional and guideline writing that KCH and GSST both contribute to.

Service changes

In 2008/09 there are no planned funded service changes. There is a planned merger of the Caldecot Centre with the local Reproductive Health Centre at Kings and the establishment of 2 local satellite clinics. All will provide Level 1-3 services, but the Caldecot Centre will focus on specialist services including HIV

No service gaps or constraints were identified.
St George’s Hospital NHS Trust
Courtyard Clinic

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Courtyard Clinic is part of St George’s Hospital NHS Trust. The service is consultant led and commissioned by Wandsworth PCT. It was funded by block contract in 2007/08. From 2008/09 the service will be funded by PbR. From 2008/9 a tariff for telephone results has been developed.

Access

The services have their doors open for 43 hours per week. Of these hours, 3.5 are provided after 7.00pm.

The service offers mixed access by walk-in and appointments. Approximately 90% of patients walk-in and appointments are provided on Tuesday evenings and Friday afternoons. The service closes to patients approximately 2/3 times a month, usually as a consequence of staff shortage. The decision is made in consultation by senior clinical staff. Data is now being collected on numbers turned away but is not currently available. Emergency patients are usually seen at presentation.

In 2007/08 it is estimated that 83% of patients self-referred, 5% were referrals from primary care, 2% referrals from secondary care and 5% referrals from voluntary / third sector agencies. 5% of referrals were seen in joint clinics with family planning.

The service is advertised in service leaflets and on websites and relevant media.

Activity

In 2007/08 there were 32,271 attendances at the service. Of these 23,042 were new / first attendances and of these 36% were under 25 years. The new to follow-up ratio 1:0.4.

The DNA rate for new appointments in 2007/08 was 4.4% and for follow-up appointments was 4.4%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.07%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.11%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.07%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.27%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.64%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.11%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.17%</td>
</tr>
<tr>
<td>Croydon</td>
<td>6.74%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.16%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.12%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.2%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.37%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.24%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.02%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.05%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.05%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0.12%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.12%</td>
</tr>
</tbody>
</table>
Kensington & Chelsea 0.13%
Kingston 0.77%
Lambeth 16.11%
Lewisham 0.65%
Newham 0.39%
Redbridge 0.06%
Richmond & Twickenham 0.29%
Southwark 0.97%
Sutton & Merton 26.12%
Tower Hamlets 0.14%
Waltham Forest 0.09%
Wandsworth 42.5%
Westminster 0.16%
Outside London 2.25%

Premises
The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
• Sexual history taking, risk assessment and signposting
• Asymptomatic STI testing and treatment (men & women)
• Simple partner notification
• HIV testing including pre test discussion and giving results
• Point of care HIV testing
• Pregnancy testing and counselling
• Referral for abortion
• Provision of emergency hormonal contraception
• Contraceptive information
• Condom distribution
• Health promotion
• Hormonal contraception / Depo-Provera
• Cervical screening and referral
• Screening and vaccination for Hepatitis B

Level 2
• Symptomatic STI testing and treatment (men & women)

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• STI outreach; young people (in primary care with Brook)
• Specialist services for ‘at risk’ groups: young people
• Specialist infection management
• Genital dermatoses
• Coordination of partner notification
• Specialist HIV treatment and care
• Psychosexual / erectile dysfunction service
• Provision and follow-up of post exposure prophylaxis for HIV

Specialist clinics for complex GUM patients

Staff
All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows: much of the contraception is delivered in shared services with family planning. HIV positive women can access depo.
Medical Staff | Nursing staff
---|---
Provision of hormonal contraception | 25% | 15%
Administration of Depo-Provera | 25% | 15%
Implant fitting and / or removal | 10% | 0%
IUD fitting and / or removal | 15% | 0%

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

| STI testing | Medical Staff | 100% | Nursing staff | 100% |
| STI treatment | 100% | 50% |
| Specialist infections management (Level 3) | 100% | 0% |

Clinical network

The service is a member of the SWAGNET. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Undergraduate training for students from St George's Medical school
- Postgraduate training for various grades of junior doctors and GPs
- STIF course for primary care

The service provides the following nursing training:

- Student nurse attachments
- In-house training packages for core GUM skills for band 5-7

STIF courses are funded by Wandsworth PCT

Service changes

- In 2008/09 an additional evening clinic for young people to provide Level 1-3 services is planned.
- Non-invasive testing for chlamydia and gonorrhoea will be introduced in year through a change in the diagnostic test.

Service gaps / constraints / plans include:

- Limited clinical capacity but no realistic hope of investment
- Poor functional utility in IT system (Sysmed)
Homerton University Hospital NHS Foundation Trust
Department of Sexual Health

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Department of Sexual Health is part of Homerton University Hospital. The service is consultant led and was funded by City & Hackney PCT by PbR in 2007/08 onwards. A service level agreement is in place in 2008/09 relating to activity.

Access

The services have their doors open for 38.5 hours per week. Of these hours none are after 7.00pm.

The service offers walk-in access. The service does not cap numbers. In extreme circumstances the doors may have to shut early. This occurs approximately once every 3 months. In 2007/08 216 patients were turned away, and of these approximately 30-40% were subsequently seen in clinic. All patients turned away are triaged and emergency patients always seen.

In 2007/08 it is estimated that 94% of patients self-referred, and 4% were referrals from primary care and 2% were referrals from secondary care.

The service is advertised in service leaflets and on the Homerton Hospital Trust website.

Activity

In 2007/08 there were 24,716 attendances at the service. Of these 16,193 were new / first attendances, and of these 39% were under 25 years. The new to follow-up ratio was 1: 0.35.

In 2007/08 % attendance by PCT of residence is listed below (note for 25% of patients the PCT of residence was unassigned):

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.62%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.32%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.09%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.19%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.06%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.34%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>52.85%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.04%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.05%</td>
</tr>
<tr>
<td>Enfield</td>
<td>4.21%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.28%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.11%</td>
</tr>
<tr>
<td>Haringey</td>
<td>7.22%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.05%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.24%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.02%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0.03%</td>
</tr>
<tr>
<td>Islington</td>
<td>2.82%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>0.03%</td>
</tr>
<tr>
<td>Kingston</td>
<td>0.02%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>0.2%</td>
</tr>
</tbody>
</table>

190
Lewisham 0.23%
Newham 2.93%
Redbridge 2.05%
Richmond & Twickenham 0.01%
Southwark 0.29%
Sutton & Merton 0.11%
Tower Hamlets 2.36%
Waltham Forest 12.52%
Wandsworth 0.08%
Westminster 0.08%
Outside London 9.52%

Premises
The service is delivered from premises that are not considered ‘fit for purpose’ as the service has outgrown them. The trust has plans for expansion of the current building.

Services offered:

Level 1
• Sexual history taking, risk assessment and signposting
• Asymptomatic STI testing and treatment (men & women)
• Simple partner notification
• HIV testing including pre test discussion and giving results
• Point of care HIV testing
• Pregnancy testing and counselling
• Referral for abortion
• Provision of emergency hormonal contraception
• Contraceptive information
• Condom distribution
• Health promotion
• Cervical screening and referral
• Screening and vaccination for Hepatitis B

Level 2
• IUD insertion and removal (including emergency IUD)
• Contraception implant insertion and removal
• Symptomatic STI testing and treatment (men & women)

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Specialist services for ‘at risk’ groups: commercial sex workers and young people
• Specialist infection management
• Genital dermatoses
• Coordination of partner notification
• Highly specialised contraception
• Difficult IUD insertion and removal
• Specialist HIV treatment and care
• Provision and follow-up of post exposure prophylaxis for HIV
• Sexual assault services

The service also provides High Resolution Anoscopy service (HRA) for the diagnosis and treatment of anal precancer as a North-East London service.

Staff
All staff have contracts solely with the service, with the exception of a Consultant physician who is jointly appointed between the service and PCT based services.

The % of staff within the service trained in providing contraception is as follows:
Specialist contraception is provided in 2 sessions each week while a Family planning nurse covers most clinics.

Specialist contraception is currently provided in 2 sessions each week, while a full time family planning nurse covers most clinic opening times. Emergency contraception and contraceptive advice is available throughout the opening hours. Plans are underway to have more trained medical and nursing staff in assessing more complex family planning needs across all clinic opening times and to increase the provision of specialist contraception provision.

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>30%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>30%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North East London Sexual Health Network. Dr Celia Skinner is the Clinical Lead and Tracy Stannard is the Network Manager. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Post graduate training for ST1 and ST2 and SpRs

The service provides the following nursing training:

- Pre-registration placements for student nurses
- Post-registration placements for Family Planning

The service receives no funding for these.

The service also provides some teaching on the local STIF course.

Service changes

In 2008/09 the service will receive new funding for:

- Motivational interviewing training.
- Automated telephone results system.
- EPR development.
- HIV inpatient and outreach testing.

Service gaps / constraints / plans include:

- Psychosexual services (not currently commissioned)
- Clinical space limiting capacity
Epsom and St Helier NHS Trust
Medical GU Department

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Medical GU Department is part of the Epsom and St Helier NHS Trust. The service is consultant led and commissioned by Sutton & Merton PCT. It was funded on a block contract in 2007/08.

Access

The services have their doors open for 34 hours per week. Of these hours, 1 is provided after 7.00pm.

The service offers mixed access with 75% walk-in and 25% appointment clinics. The service does not cap walk-in numbers, but in exceptional circumstances does have to close to patients (turn patients away). All patients turned away are triaged and directed to another service or the next available clinic. The clinic does not collect data on patients turned away. Emergency patients are seen.

In 2007/08 the service has no data on how patients accessed the service.

The service is advertised in service leaflets and on the Epsom and St Helier Trust website, on the SWAGNET website, in yell.com and the yellow pages.

Activity

In 2007/08 there were 8,316 attendances at the service. Of these 5,343 were new / first attendances, and of these 17% were under 25 years. The new to follow-up ratio was 1:0.35

The DNA rate for new appointments in 2007/08 was 2% and for follow-up appointments was 11%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnet</td>
<td>0.01%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.07%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.03%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.18%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.04%</td>
</tr>
<tr>
<td>Croydon</td>
<td>5.8%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.03%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.03%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.08%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.07%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.03%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.04%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0.03%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.01%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>0.01%</td>
</tr>
<tr>
<td>Kingston</td>
<td>0.76%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>0.75%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>0.26%</td>
</tr>
<tr>
<td>Newham</td>
<td>0.04%</td>
</tr>
<tr>
<td>Richmond &amp; Twickenham</td>
<td>0.14%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are considered ‘fit for purpose’ but clinical space is at a premium.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Cervical screening and referral
- Hormonal contraception / Depo-Provera (only available for <18s in the Point Clinic)
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: at Sutton Connexions Centre
- Specialist services for ‘at risk’ groups: young people (Connexions)
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction services
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

In 2008/09 point of care HIV testing is being implemented.

Staff

All staff have contracts solely with the service, with the exception of the SpR who is on the St Georges training rotation spending 2 days a week at St Helier and 3 days a week at St Georges.

The % of staff within the service trained in providing contraception is as follows: much of the contraception is delivered in shared services with family planning. HIV positive women can access depo.

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>83%</td>
<td>66%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>33%</td>
<td>0%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>33%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>33%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:
Medical Staff | Nursing staff
---|---
STI testing | 100% | 100%
STI treatment | 100% | 0%
Specialist infections management (Level 3) | 100% | 0%

While the service does not provide chlamydia screening as part of the NCSP, 56% of staff is trained to provide treatment as part of the NCSP.

**Clinical network**

The service is a member of the SWAGNET. The network is provider led and has commissioning involvement.

**Education and Training**

The service provides the following medical training:

- Undergraduate training
- Postgraduate training for various grades of junior doctors, family planning doctors and GPs
- SpR training

The trust receives SIFT monies.

The service provides the following nursing training:

- Post-registration family planning nurses
- Practice nurses
- Midwives

The service also provides:

- Training in partner notification for the local NCSP
- STIF courses

**Service changes**

The service will receive no new funding in 2008/09. However there are negotiations with Sutton & Merton Family Planning Service to initiate a joint young persons clinic at Levels 1, 2 and 3 and increase integration and working between the services. Other plans include:

- Development of templates for EPR
- Lablink for pathology results to interface with Lillie system
- In process of having Telephonetics VIP installed so that patients can phone for results at any time (St Helier Hospital has taken on a contract with Telephonetics VIP. This will include Medical GU).
- Dual Naats - investment required.
- Young Persons One Stop Shop to be recommenced in Merton Sept 2008.
Newham University Hospital
Greenway Centre

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Greenway Centre is part of Newham University Hospital. The service is consultant led and was funded via Newham PCT by PbR in 2007/08.

Access

The services have their doors open for 40.5 hours per week. Of these hours, 2 are after 7pm

The service offers walk-in access. The service does not cap numbers. In extreme circumstances the doors may have to shut early and once or twice a month patients are triaged. Data is collected on patients ‘turned away’ and in 2007/08 8 patients were turned away.

In 2007/08 it is estimated that 97% of patients self-referred, and 3% were referrals from secondary and primary care.

The service is advertised in service leaflets, websites, via NHS Direct and local media.

Activity

In 2007/08 there were 15970 attendances at the service. Of these 10838 were new / first attendances of these 48% were under 25 years. The new to follow-up ratio was 1: 0.47

The DNA rate is not known for 2007/08.

In 2007/08 % attendance by PCT of residence is listed below (note for 25% of patients the PCT of residence was unassigned):

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>4%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.1%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.1%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.06%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.01%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.05%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.6%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.08%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.03%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.2%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.33%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.3%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.04%</td>
</tr>
<tr>
<td>Havering</td>
<td>1.3%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.03%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0.01%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.16%</td>
</tr>
<tr>
<td>Kingston</td>
<td>0.08%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>0.13%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>0.19%</td>
</tr>
<tr>
<td>Newham</td>
<td>79%</td>
</tr>
</tbody>
</table>
Redbridge 4%
Southwark 0.11%
Sutton & Merton 0.04%
Tower Hamlets 1.3%
Waltham Forest 3.9%
Wandsworth 0.04%
Westminster 0.05%
Outside London 1.45%

Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: weekly GUM services in community setting (Appleby Centre), weekly young peoples, CSW outreach with U Turn
- Specialist services for ‘at risk’ groups: commercial sex workers and young people
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Highly specialised contraception
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>30%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>20%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:
<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>20%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>20%</td>
</tr>
</tbody>
</table>

**Clinical network**

The service is a member of the North East London Sexual Health Network. Dr Celia Skinner is the Clinical Lead and Tracy Stannard is the Network Manager. The network is provider led and has commissioning involvement.

**Education and Training**

The service provides the following medical training:

- Undergraduate medical training for Queen Mary’s University
- Post graduate training for FY2, ST1 and ST2 and SpRs

The service provides the following nursing training:

- Pre-registration placements for student nurses

**Service changes**

There are no funded service changes planned for 2008/09. There is an expected increase in activity written into the SLA with funding being recovered via PbR.

Service gaps / constraints / plans include:

- Qualified nurses to manage symptomatic patients
- A dedicated service for MSM
- Limited provision of family planning services
- No electronic patient record
General information

The Jefferiss Wing is at St Mary’s Hospital, part of Imperial College Healthcare Trust. The service is consultant led and commissioned by Westminster PCT. It was funded by a block contract in 2007/8 and from 2008/9 moves to PbR with the usual London billing arrangements.

Access

The services have their doors open for 50.25 hours per week. Of these hours, none are provided after 7pm or at the weekend.

The service offers access by walk-in only. The service does work to a capacity guideline, which when met triggers triage by senior clinical staff. In rare circumstance symptomatic patients are given priority booking for the following day. Data is collected on patients ‘turned away’. There were 42 in 2007/8, and these attendances were almost exclusively on Mondays or post bank holidays.

In 2007/08 77% of patients self-referred, 3% were referrals from primary care, 2% referrals from secondary care and 1% referrals from voluntary / third sector agencies. 17% of referrals presented with contact slips.

The service is advertised in service leaflets, on websites and via NHS Direct. The trust website has a service specific page and bespoke sites for the Working Men Project, Praed Street Project and GUYs clinic.

Activity

In 2007/08 there were 51,528 attendances at the service. Of these 29,116 were new / first attendances. The service was unable to provide data on the % of those attending under 25 years. The new to follow-up ratio was 1:0.77.

The DNA rate for all appointments in 2007/08 was 8.76%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.31%</td>
</tr>
<tr>
<td>Barnet</td>
<td>2.27%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.14%</td>
</tr>
<tr>
<td>Brent</td>
<td>11.11%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.36%</td>
</tr>
<tr>
<td>Camden</td>
<td>5.01%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>1.96%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.58%</td>
</tr>
<tr>
<td>Ealing</td>
<td>3.74%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.89%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.63%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>4.61%</td>
</tr>
<tr>
<td>Haringey</td>
<td>2.61%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.94%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.11%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>1.16%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are not considered ‘fit for purpose’. The clinical area has limited capacity and poor infrastructure that does not provide a modern, patient focussed environment. However this is not thought to be detrimental to patient care.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2

- IUD insertion and removal (including emergency IUD fitting)
- Symptomatic STI testing and treatment (men & women)

Level 3

- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: female and male sex workers, young MSM <30 and young people
- Specialist services for ‘at risk’ groups: appointment and drop-in for female and male sex workers, young MSM <30 and young people
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Specialist clinics for complex GUM patients: complex wart treatments, vulval clinic, sexual health psychology clinics, male pelvic pain and prostatitis, genital biopsy clinics, joint GUM consultant/clinical psychology clinics.
**Staff**

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>13%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>37%</td>
<td>100%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>12%</td>
<td>3%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>24%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>18 %</td>
</tr>
</tbody>
</table>

**Clinical network**

The service is a member of the North West Sector Network. Dr Gary Brook is the clinical lead and Melanie Britton the Manager. The network is provider led and has commissioning involvement.

**Education and Training**

The service provides the following medical training:

- Undergraduate training for students from Imperial College Medical School
- Postgraduate training for various grades of junior doctors and GPs
- STIF course for primary care
- Bespoke training for primary care

The service provides the following nursing training:

- In-house training packages for core GUM skills which are open on an ad hoc basis to external students

The service also provides:

- Ad hoc clinical placements for overseas medical staff
- Clinical placements for clinical psychology students

The trust receives SIFT funding for medical education but this is not identified in the Departmental budget. STIF courses are provided and some bespoke courses generate income to cover costs of administration.

**Service changes**

- In 2008/09 there are no planned service changes enhancements, however some redistribution of clinical capacity may allow Saturday morning opening, but with no overall reduction in opening times.

**Service gaps / constraints / plans include:**

- Uncertainty over income to be derived via PbR
- Inadequate and dated clinical space with poor environment for patients in the layout/ waiting areas and the need to queue outside
- Limited clinical space to expand into
- The IT does not support a modern service: there is a need to improve booking procedures with self-registration and the development of a full electronic record
General information

The John Hunter Clinic for Sexual Health is located at the St Stephen’s Centre, part of the Chelsea & Westminster Hospital’s services for sexual health and HIV. The service is consultant led and commissioned by Kensington & Chelsea PCT. It was funded by PbR from 2007/8 onwards. Service level agreements are in place relating to activity.

Access

The services have their doors open for 43.5 hours per week. Of these hours, 1.5 are provided after 7pm.

The service offers mixed access with 15% walk-in and 85% appointment clinics. The service does not cap numbers or turn patients away. Emergency patients are triaged by phone or in person on review. Data is not collected on patients ‘turned away’.

In 2007/08 it is estimated that 97.7% of patients self-referred, 0% were referrals from primary care, 2.2% referrals from secondary care and 0% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets, posters and websites.

Activity

In 2007/08 there were 22,357 attendances at the service. Of these 17,118 were new / first attendances, and of these 24% were under 25 years. The new to follow-up ratio was 1:0.3

The DNA rate for new appointments in 2007/08 was 14% and follow-up appointments was 16%.

In 2007/08 % attendance by PCT of residence is listed below.

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.06%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.39%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.06%</td>
</tr>
<tr>
<td>Brent</td>
<td>1.1%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.32%</td>
</tr>
<tr>
<td>Camden</td>
<td>1.21%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.9%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.39%</td>
</tr>
<tr>
<td>Ealing</td>
<td>1.67%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.2%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.29%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>19.47%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.7%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.19%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.05%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.25%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>1.17%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.98%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>23.17%</td>
</tr>
</tbody>
</table>
Kingston 0.3%
Lambeth 3.81%
Lewisham 0.59%
Newham 0.48%
Redbridge 0.16%
Richmond & Twickenham 0.93%
Southwark 1.64%
Sutton & Merton 1.09%
Tower Hamlets 1.04%
Waltham Forest 0.42%
Wandsworth 11.94%
Westminster 4.77%
Outside London 20.26%

Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: sex workers (MSM) fortnightly provided by WLCSH with K&C PCT, contact clinics for young people, BME POCT HIV testing (Know4Sure) weekly with THT
- Specialist services for ‘at risk’ groups: Young people’s clinic, Sexual Health Clinic for HIV positive patients
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Specialist clinics for herpes, prostatitis, anoscopy and chronic GU conditions.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:
Medical Staff  Nursing staff

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>40%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>0%</td>
<td>5%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>0%</td>
<td>10%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>10%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North West Sector Network. Dr Gary Brook is the clinical lead and Melanie Britton the Manager. The network has commissioning involvement.

Education and Training

The service provides the following medical training:

- Undergraduate training for medical students
- Postgraduate training for various grades of junior doctors

The trust receives SIFT monies.

The service provides the following nursing training:

- Pre-registration placements for student nurses from TVU
- Post-registration Family planning training for own staff

The service receives no funding for these.

The service also provides:

- Ad hoc clinical placements for overseas medical staff
- Training for SpRs from other specialities including dermatology and obstetrics and gynaecology
- Sessions for doctors undertaking the Diploma of Reproductive & Sexual Health

The service receives no funding for these.

Service changes

In 2008/09 there are no planned new investments.

Service gaps / constraints / plans include:

- Desire to develop “one stop shop” model but the PCT need to agree a tariff
- Limitation in family planning through inability to prescribe implanon
- IT upgrade planned but investment needed to improve e triage and SMS texting services
- Staff training to expand roles to enable streaming
Guys and St Thomas’ NHS Foundation Trust
GUM services
Lydia and Lloyd Clinics

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Lydia clinic is based at St Thomas’ Hospital and Lloyd Clinic at Guys Hospital, part of Guys and St Thomas’ NHS Foundation Trust (GSTT). The service is consultant led and commissioned by Lambeth PCT. It was funded by PbR 2007/8 onwards.

Access

The services have their doors open for: Lydia 39 hours and Lloyd 37 hours per week. Of these hours, 1 hour is provided after 7 pm.

The service offers mixed access by walk-in and appointments: 70% of patients are walk-in and 30% attend by appointments. The service does not cap patient numbers, although occasionally patients are asked to attend the next session. Rarely the doors are closed, usually as a consequence of staffing shortage. The decision is made by senior medical staff. Data is not collected on patients ‘turned away’

In 2007/08 it is estimated that 94% of patients self-referred, 3% were referrals from primary care, 2% referrals from secondary care and 1% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets, on websites, relevant media and via NHS Direct.

Activity

In 2007/08 there were 43,406 attendances at the service. Of these 29,688 were new / first attendances. There is no data on the % that were under 25 years. The new to follow-up ratio was 1: 0.46

The DNA rate for new appointments in 2007/08 was 5% and for follow-up appointments 30%

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.24%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.71%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.9%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.95%</td>
</tr>
<tr>
<td>Bromley</td>
<td>1.68%</td>
</tr>
<tr>
<td>Camden</td>
<td>1.69%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>2.29%</td>
</tr>
<tr>
<td>Croydon</td>
<td>1.92%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.61%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.63%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>2.84%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>1.03%</td>
</tr>
<tr>
<td>Haringey</td>
<td>1.62%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.24%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.21%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.14%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0.34%</td>
</tr>
</tbody>
</table>
Islington 2.05%
Kensington & Chelsea 0.68%
Kingston 0.21%
Lambeth 20.96%
Lewisham 10.68%
Newham 1.3%
Redbridge 0.45%
Richmond & Twickenham 0.36%
Southwark 22.61%
Sutton & Merton 1.13%
Tower Hamlets 2.97%
Waltham Forest 1.02%
Wandsworth 5.15%
Westminster 1.94%
Outside London 16.62%

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. The Lydia Clinic at St Thomas’ Hospital was designed for a third of the current activity levels and is poor of design with no natural light. The Lloyd Clinic at Guys Hospital is acceptable but cramped.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraception implant insertion and removal
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: weekly STI service with Brook for young men, weekly integrated service
- Specialist services for ‘at risk’ groups: MSM and LBTG, young people Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service (limited)
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Specialist clinics for complex GUM patients

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.
The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>40%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>90%</td>
<td>10%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>5%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>5%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the South East London Sexual Health Network. Dr Michael Brady is the Clinical Lead. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Undergraduate training for students
- Postgraduate training for various grades of junior doctors
- STIF training for primary care

SIFT funding is received by the trust for medical training. STIF funding is provided by the PCT

The service provides the following nursing training:

- Pre-registration placements for student nurses
- In-house training for nurses

The Riverside Sexual Health service has just won the contract to provide sexual health services for the British Forces in Germany. The clinical governance will be provided by GSTT.

Lambeth and Southwark PCTs coordinate training and teaching for local primary care professional and guideline writing that KCH and GSST both contribute to.

Service changes

In 2008/09 there are no planned funded service changes. Although a call centre, telephonetics service for electronic retrieval of results and extended hours are all planned for 2008/9.

Service gaps / constraints / plans include:

- A business case, with trust and PCT approval is being developed to provide new facilities to deliver an integrated sexual health service with planned attendance of 60,000 patients, with attached regional training and research facilities.
Royal Free Hospital NHS Trust
Marlborough Department of Sexual Health

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Marlborough Department of Sexual Health is part of the Royal Free Hospital. The service is consultant led and commissioned by Camden PCT. It was funded by PbR in 2007/8 and the SLA for 2008/9 has been adapted to reflect predicted activity changes.

Access

The services have their doors open for 33 hours per week. Of these hours, 1 hour is provided after 7 pm.

The service offers mixed access by walk-in and appointments. Approximately 10% of patients walk-in and 90% are appointments clinics. Emergency patients are usually seen at presentation.

In 2007/08 it is estimated that 80% of patients self-referred, 10% were referrals from primary care and 10% referrals from secondary care.

The service is advertised in service leaflets and on websites and via NHS Direct.

Activity

In 2007/08 there were 18,102 attendances at the service. Of these, 10,884 were new / first attendances, and of these 29.8% were under 25 years. The new to follow-up ratio was 1: 0.7

The DNA rate for new appointments in 2007/08 was 5.1% and for follow-up appointments was 24%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Barnet</td>
<td>20%</td>
</tr>
<tr>
<td>Bexley</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Brent</td>
<td>7%</td>
</tr>
<tr>
<td>Bromley</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Camden</td>
<td>42%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>1%</td>
</tr>
<tr>
<td>Croydon</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Ealing</td>
<td>1%</td>
</tr>
<tr>
<td>Enfield</td>
<td>1%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Haringey</td>
<td>3%</td>
</tr>
<tr>
<td>Harrow</td>
<td>1%</td>
</tr>
<tr>
<td>Havering</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Islington</td>
<td>10%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Kingston</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>1%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Newham</td>
<td>&lt;1%</td>
</tr>
</tbody>
</table>
Redbridge <1%
Richmond & Twickenham <1%
Southwark 1%
Sutton & Merton <1%
Tower Hamlets 1%
Waltham Forest <1%
Wandsworth <1%
Westminster 3%
Outside London <1%

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. There are too few clinical rooms and patients often have to wait for room availability.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Contraceptive information
- Condom distribution
- Health promotion
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach; full STI services to Holloway and Pentonville Prisons.
- Specialist services for ‘at risk’ groups: young people and gay men
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Psychosexual / erectile dysfunction service
- Sexual assault services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows. However, implants and IUDs are not available within the department.

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>5%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>5%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>
Clinical network

The service is a member of the North Central Network.

Education and Training

The service provides the following medical training:

- Undergraduate training for medical students
- Postgraduate training for various grades of junior doctors and GPs
- STIF course for primary care

The service provides the following nursing training:

- Student nurse attachments

Training is also provided for:

- School students
- Youth workers

STIF courses are also provided locally.

Service changes

In 2008/09 there will be:

Additional evening capacity for services up to Level 3.

Service gaps / constraints / plans include:

- no identified tariff for integrated services or current clinical space
- need for psychosexual services
- need to enhance electronic ordering of laboratory tests
Mayday University Hospital NHS Trust  
Department of GU Medicine

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Department of GU Medicine is part of the Mayday University Hospital NHS Trust. The service is consultant led and commissioned by Croydon PCT. It was funded on a block contract in 2007/8 and will move to PbR in 2008/9.

Access

The services have their doors open for 45 hours per week. Of these hours, 1 is provided after 7pm.

The service offers mixed access by walk-in and appointments. Approximately 75% of patients walk-in and 25% of patients access via appointments. The service does cap walk-in numbers, matching demand against staffing and reviewing this throughout the day. The service rarely closes to patients and if it does patients are offered an appointment for the following day. The decision is made in consultation by senior clinical staff. Data is not collected on numbers turned away. Emergency patients are always seen at presentation and those with contact slips for the bacterial STIs are also prioritised.

In 2007/08 it is estimated that 99% of patients self-referred, <1% were referrals from primary care, <1% referrals from secondary care and <1% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets and on websites and via NHS Direct.

Activity

In 2007/08 there were 21,825 attendances at the service. Of these 14,826 were new / first attendances of these 51% were under 25 years. The new to follow-up ratio was 1: 0.47

The DNA rate for new appointments in 2007/08 was 25% and for follow-up appointments was 10%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Barnet</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Bexley</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Brent</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Bromley</td>
<td>2%</td>
</tr>
<tr>
<td>Camden</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Croydon</td>
<td>85%</td>
</tr>
<tr>
<td>Ealing</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Enfield</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Islington</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Kingston</td>
<td>&lt;1%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
• Sexual history taking, risk assessment and signposting
• Asymptomatic STI testing and treatment (men & women)
• Simple partner notification
• HIV testing including pre test discussion and giving results
• Pregnancy testing and counselling
• Referral for abortion
• Provision of emergency hormonal contraception
• Contraceptive information
• Condom distribution
• Health promotion
• Hormonal contraception / Depo-Provera (only available for <18s in the Point Clinic)
• Screening and vaccination for Hepatitis B

Level 2
• Contraception implant insertion and removal
• Symptomatic STI testing and treatment (men & women)

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Specialist services for ‘at risk’ groups: young people (the Point Clinic)
• Specialist infection management
• Genital dermatoses
• Coordination of partner notification
• Specialist HIV treatment and care
• Provision and follow-up of post exposure prophylaxis for HIV
• Sexual assault services

Specialist clinics for complex GUM patients

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows: much of the contraception is delivered in shared services with family planning. HIV positive women can access depo.

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>15%</td>
<td>30%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>Data not provided</td>
<td>Data not provided</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>Data not provided</td>
<td>Data not provided</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>Data not provided</td>
<td>Data not provided</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:
<table>
<thead>
<tr>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Clinical network

The service is a member of the SWAGNET. Dr Richard Lau is the clinical lead and Janine Railton the manager. The network is provider led and has commissioning involvement.

### Education and Training

The service provides the following medical training:

- Undergraduate training from students from St George’s Medical School
- Postgraduate training for various grades of junior doctors and GPs
- STIF course for primary care

The service provides the following nursing training:

- Pre-registration student nurses and midwives
- Post-registration family planning nurses

### Service changes

- There are no planned service changes for 2008/9.
- No service gaps / constraints / plans were identified.
Camden PCT Provider Services
Mortimer Market Centre

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Mortimer Market Centre is part of Camden PCT Provider Services. The service is nurse consultant led. It was funded by a block contract in 2007/8 by Camden PCT and from 2008/9 moved to PbR with the usual London billing arrangements. Service level agreements relating to activity are in place.

Access

The services have their doors open for 41.5 hours per week. Of these hours, 1 is provided after 7pm.

The service offers access by appointments. However, walk-in patients are triaged and seen as required either as an extra if an emergency or by booking in to the next available slot. Nearly all patients are offered appointments on the same day. The service does not close to patients due to pressure of numbers.

In 2007/08 95% of patients self-referred, <2% were referrals from primary care, <1% referrals from secondary care, <1% referrals from voluntary / third sector agencies and <1% were referrals from outreach services and private clinics.

The service is advertised in service leaflets, the local press, on websites, in yell.com, by THT, GMFA, fpa, BASHH, nhs.uk and has its own marketing website www.londonSTItesting.nhs.uk.

Activity

In 2007/08 there were 33,490 attendances at the service. Of these 27,054 were new / first attendances, and of these 31% were under 25 years. The new to follow-up ratio was 1:0.19

The DNA rate in 2007/08 for new appointments was 16% and for follow-up appointments was 19%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnet</td>
<td>3%</td>
</tr>
<tr>
<td>Brent</td>
<td>2%</td>
</tr>
<tr>
<td>Bromley</td>
<td>1%</td>
</tr>
<tr>
<td>Camden</td>
<td>27%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>6%</td>
</tr>
<tr>
<td>Croydon</td>
<td>1%</td>
</tr>
<tr>
<td>Ealing</td>
<td>1%</td>
</tr>
<tr>
<td>Enfield</td>
<td>1%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>1%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>1%</td>
</tr>
<tr>
<td>Haringey</td>
<td>6%</td>
</tr>
<tr>
<td>Islington</td>
<td>13%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>2%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>5%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>2%</td>
</tr>
<tr>
<td>Newham</td>
<td>1%</td>
</tr>
<tr>
<td>Redbridge</td>
<td>1%</td>
</tr>
<tr>
<td>Southwark</td>
<td>4%</td>
</tr>
<tr>
<td>Sutton &amp; Merton</td>
<td>1%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: CLASH Piccadilly for commercial sex workers
- Contraception outreach
- Specialist services for ‘at risk’ groups: commercial sex workers
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Specialist clinics for complex GUM patients: chronic genital warts, chronic herpes and hepatitis.

Staff

There are some staff jointly appointed between Camden PCT and UCL Medical School.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>0%</td>
<td>5%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:
<table>
<thead>
<tr>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
</tr>
</tbody>
</table>

While the service does not provide chlamydia screening as part of the NCSP, 100% of staff is trained to provide treatment as part of the NCSP.

**Clinical network**

The service is a member of the North Central Sector Network. Dr Eva Jungmann is the Clinical Lead. The network is provider led and has commissioning involvement.

**Education and Training**

The service provides the following medical training:
- Undergraduate training for students from UCL
- ST 1-3 and GPVTS training
- In-house training for medical staff

The London deanery pay for doctors in training via MADEL and SIFT.

The service provides the following nursing training:
- Undergraduate nursing placements
- In-house training for nurses
- Foundation Sexual Health Course in conjunction with Middlesex University

The service receives no funding for these.

The service also provides 2 hours a week protected time for in house training / audit presentations for all clinical staff.

**Service changes**

In 2008/09 the service will receive new investment for the following:

- Online booking and registration system
- HIV 60 second point of care testing
- SMS results service
- Electronic patient record implementation

No service gaps / constraints were identified.
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

Northwick Park GUM clinic is part of Northwick Park Hospital. The service is consultant led and was funded via Harrow and Brent PCTs on a block contract in 2007/08 but will be funded on PbR in 2008/09.

Access

The services have their doors open for 35 hours per week. Of these hours, 1 is after 7pm.

The service offers mixed access: 80% of patients are ‘walk-in’ and 20% appointments. The service does not cap numbers. In extreme circumstances the doors may have to shut early. Data is not collected on patients ‘turned away’. Symptomatic patients are triaged by clinical staff and urgent cases will always been seen on the same day.

In 2007/08 it is estimated that 75% of patients self-referred, 20% were referrals from primary care and 5% referrals from secondary care.

The service is advertised in service leaflets, via NHS Direct and through Harrow PCT Health Promotion department.

Activity

In 2007/08 there were 10,608 attendances at the service. Of these 7,776 were new / first attendances, and of these 45% were under 25 years. The new to follow-up ratio was 1:0.36

The DNA rates in 2007/08 were estimated as: new appointments <5% and follow-up appointments <5%.

In 2007/08 % attendance by PCT of residence is listed below (note for 25% of patients the PCT of residence was unassigned):

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnet</td>
<td>4.9%</td>
</tr>
<tr>
<td>Brent</td>
<td>25%</td>
</tr>
<tr>
<td>Camden</td>
<td>1%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>1%</td>
</tr>
<tr>
<td>Ealing</td>
<td>7%</td>
</tr>
<tr>
<td>Enfield</td>
<td>1%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>2%</td>
</tr>
<tr>
<td>Harrow</td>
<td>48%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>8%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>1%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>1%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>1%</td>
</tr>
<tr>
<td>Southwark</td>
<td>1%</td>
</tr>
<tr>
<td>Waltham Forest</td>
<td>1%</td>
</tr>
<tr>
<td>Outside London</td>
<td>1%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
• Sexual history taking, risk assessment and signposting
• Asymptomatic STI testing and treatment (men & women)
• Simple partner notification
• HIV testing including pre test discussion and giving results
• Pregnancy testing and counselling
• Referral for abortion
• Provision of emergency hormonal contraception
• Contraceptive information
• Condom distribution
• Health promotion
• Hormonal contraception / Depo-Provera
• Cervical screening and referral
• Screening and vaccination for Hepatitis B

Level 2
• Symptomatic STI testing and treatment (men & women)

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Specialist services for ‘at risk’ groups: young people
• Specialist infection management
• Genital dermatoses
• Coordination of partner notification
• Specialist HIV treatment and care
• Provision and follow-up of post exposure prophylaxis for HIV
• Sexual assault services

Staff

All staff have contracts solely with the service, but work across Northwick Park Hospital and the Central Middlesex Hospital and share a clinical lead.

The % of staff within the service trained in providing contraception is described below. However, contraception is not provided by the service except within the young person’s clinic.

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>10%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North West Clinical Network. Dr Gary Brook is the Clinical Lead and Melanie Britton is the Network Manager. The network is provider led and has commissioning involvement.
Education and Training

The service provides the following medical training:

- Undergraduate medical training for Imperial College
- Postgraduate training for FY2, ST1 and ST2 and SpRs
- STIF courses for primary care

The service provides the following nursing training:

- Pre-registration placements for student nurses

The local National Chlamydia Screening Programme is situated within the Department and Dr Moses Kapembwa provides clinical leadership and governance.

Service changes

- In 2008/09 the service will provide additional walk-in capacity and recoup funding via PbR.

No service gaps / constraints / plans were identified.
Ealing Hospital NHS Trust
Pasteur Suite

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Pasteur Suite is based at Ealing Hospital NHS Trust. The service is consultant led and commissioned by Ealing. It was funded by partial PbR in 2007/8 and from 2008/9 will move to full PbR with the usual cross charging arrangements.

Access

The services have their doors open for 14 hours per week. There is no provision after 7pm or at the weekend.

The service offers mixed access by walk-in and appointments: 95% of patients are walk-in and 5% attend by appointments. Patient numbers are capped in the walk-in service and approximately once a week the doors are closed prematurely. Data is not collected on patients ‘turned away’. Triage is conducted by senior nursing staff and emergency patients are seen.

In 2007/08 it is estimated that 70% of patients self-referred, 20% were referrals from primary care, 5% referrals from secondary care and 5% from voluntary/third agency referrals.

The service is advertised in service leaflets and via websites.

Activity

In 2007 there were 10,267 attendances at the service. Of these 6,307 were new / first attendances.

There is no data on the percentage who were under 25 years. The new to follow-up ratio was 1:0.62

The DNA rate for appointments is not known.

In 2007/08 the estimated % attendance by PCT of residence is listed below.

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brent</td>
<td>c2%</td>
</tr>
<tr>
<td>Ealing</td>
<td>c70%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>c8%</td>
</tr>
<tr>
<td>Other London and outside London PCTs</td>
<td>c20%</td>
</tr>
</tbody>
</table>

Premises

The service is delivered from premises that are not considered ‘fit for purpose” with a significant lack of clinical space.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
• Provision of emergency hormonal contraception
• Contraceptive information
• Condom distribution
• Health promotion
• Hormonal contraception/ depo-Provera
• Cervical screening and referral
• Screening and vaccination for Hepatitis B

Level 2
• Symptomatic STI testing and treatment (men & women)

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Specialist services for ‘at risk’ groups: young people
• Specialist Infection management
• Genital dermatoses
• Coordination of partner notification
• Specialist HIV treatment and care
• Provision and follow-up of post exposure prophylaxis for HIV
• Sexual assault services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>25%</td>
<td>16%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>50%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>50%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>50%</td>
</tr>
</tbody>
</table>

Specialist infections management (Level 3) 100% Unknown

Clinical network
The service is a member of the North West London Sexual Health Network. Dr Gary Brook is the clinical lead and Melanie Britton the Network Manager. The network is provider led and has commissioning involvement.

Education and Training
The service provides the following medical training:
• Undergraduate medical students
• Postgraduate training for various grades of junior doctors

The service provides the following nursing training:
• Post-registration nurses

Service changes
In 2008/09 there are no planned funded service changes.
Service gaps / constraints / plans include:

- Increases in medical staff and un-registered nurses
- Clinical space
- Investment in an IT system
- Development of more nurse-delivered care
Central Middlesex Hospital  
(North West London Hospitals NHS Trust)  
Patrick Clements Clinic

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Patrick Clements Clinic is part of the North West London Hospitals Trust. The service is consultant led and commissioned by Brent PCT. It was funded by a block contract in 2007/8 and from 2008/9 moves to PbR with the usual London billing arrangements. Service level agreements are in place relating to activity based on previous volume plus 10%.

Access

The services have their doors open for 30 hours per week. Of these hours none are after 7pm or on a weekend.

The service offers mixed access: 90% of clinics are walk-in and 10% appointments. The service caps numbers via its ticket system and triages for emergencies and young people who will always be seen. Patients are rarely turned away. If they are, they are seen at the next available session. The service has just started collecting data on patients turned away.

In 2007/08 it is estimated that 40% of patients self-referred, 40% were referrals from primary care, 5% referrals from secondary care and 15% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets, on websites, in the phone book and Thomson directory.

Activity

In 2007/08 there were 12,739 attendances at the service. Of these 9,406 were new / first attendances, and of these it is estimated that 40% were under 25 years. The new to follow-up ratio was 1:0.26.

The DNA rate for new appointments in 2007/08 was 10%.

In 2007/08 % attendance by PCT of residence is listed below.

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnet</td>
<td>3.5%</td>
</tr>
<tr>
<td>Bexley</td>
<td>3.5%</td>
</tr>
<tr>
<td>Brent</td>
<td>68%</td>
</tr>
<tr>
<td>Bromley</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Camden</td>
<td>1%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Corydon</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Ealing</td>
<td>15%</td>
</tr>
<tr>
<td>Enfield</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>3%</td>
</tr>
<tr>
<td>Haringey</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Harrow</td>
<td>2%</td>
</tr>
<tr>
<td>Havering</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>1.5%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>1%</td>
</tr>
<tr>
<td>Islington</td>
<td>&lt;1%</td>
</tr>
</tbody>
</table>
Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraception implant insertion and removal
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: weekly GUM clinic at a community clinic in Wembley
- Specialist services for ‘at risk’ groups: young people
- Specialist infection management
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Staff

All staff have contracts solely with the service, but work across Northwick Park Hospital and the Central Middlesex Hospital and share a clinical lead. The receptionists at the outreach clinic are provided by the PCT.

The % of staff within the service trained in providing contraception is as follows:
Medical Staff  Nursing staff
Provision of hormonal contraception  10%  0%
Administration of Depo-Provera  100%  100%
Implant fitting and / or removal  10%  0%
IUD fitting and / or removal  10%  0%

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

Medical Staff  Nursing staff
STI testing  100%  100%
STI treatment  100%  100%
Specialist infections management (Level 3)  100%  0%

Clinical network

The service is a member of the North West Sector Network. Dr Gary Brook is the Clinical Lead and Melanie Britton the Network Manager. The network has commissioning involvement.

Education and Training

The service provides the following medical training:

- Undergraduate training
- SHOs
- SpRs
- GPs

The service receives no funding to provide this. The SpR is funded via the London Deanery.

The service provides the following nursing training:

- Pre-registration placements for student nurses from TVU

The service receives no funding for this.

The service also provides:

- Lectures to hospital, GPs and community groups

The service provides clinical governance for the Brent and Harrow PCTs chlamydia screening programme. The Chlamydia Screening Office is based at Northwick Park Hospital.

Service changes

In 2008/09 the service will via PbR invest in appointing more staff and developing the service including increasing community provision and seeking opportunities for joint working with community contraception services.

A Staff Grade (p/t) doctor plus 2 extra nurses will allow the service to see more patients and open longer hours. Planned opening on Friday afternoon from September 2008.

The service reported no service gaps or constraints now that PbR has been implemented.
General information

The Roehampton Clinic is located at Queen Mary’s Hospital, Roehampton but the service is delivered by St George’s Hospital NHS Trust. The service is consultant led and commissioned by Wandsworth PCT. It was funded by an uplifted block contract in 2007/08. From 2008/9 PbR was implemented and an additional tariff for telephone results was developed.

Access

The services have their doors open for 31.5 hours per week. Of these hours, 1 hour is provided after 7 pm.

The service offers mixed access by walk-in and appointments. Approximately 40% of patients walk-in and 60% of patients have appointments. The service does not cap numbers and has not had to turn patients away so there is no requirement for data collection. Emergency patients are assessed by health advisors or a nurse and usually seen on presentation.

In 2007/08 it is estimated that 70% of patients self-referred, 25% were referrals from primary care, 2% referrals from secondary care, 1% from the voluntary/third agency sector and 2% from family planning services.

The service is advertised in service leaflets, has its own website and via other websites. There is local advertising on TFL buses for the young people’s clinic.

Activity

In 2007/08 there were 10,647 attendances at the service. Of these 6,672 were new / first attendances, and of these 40% were under 25 years. The new to follow-up ratio was 1:0.6

The DNA rate for new appointments in 2007/08 was 8% and for follow-up appointments was 16.45%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.02%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.13%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.25%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.37%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.11%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.14%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.11%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.6%</td>
</tr>
<tr>
<td>Ealing</td>
<td>1.01%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.20%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.05%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>2.52%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.21%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.06%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.05%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.06%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>1.74%</td>
</tr>
</tbody>
</table>
Islington 0.1%
Kensington & Chelsea 0.54%
Kingston 4.75%
Lambeth 2.16%
Lewisham 0.6%
Newham 0.18%
Redbridge 0.04%
Richmond & Twickenham 18.98%
Southwark 0.6%
Sutton & Merton 5.89%
Tower Hamlets 0.31%
Waltham Forest 0.08%
Wandsworth 53.32%
Westminster 0.23%
Outside London 3.74%

Premises

The service is delivered from premises that are considered ‘fit for purpose’

Services offered:

Level 1
• Sexual history taking, risk assessment and signposting
• Asymptomatic STI testing and treatment (men & women)
• Simple partner notification
• HIV testing including pre test discussion and giving results
• Pregnancy testing and counselling
• Referral for abortion
• Provision of emergency hormonal contraception
• Contraceptive information
• Condom distribution
• Health promotion
• Hormonal contraception / Depo-Provera (HIV patients only)
• Cervical screening and referral (HIV patients only)
• Screening and vaccination for Hepatitis B

Level 2
• Symptomatic STI testing and treatment (men & women)

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Specialist services for ‘at risk’ groups: young people (The Point)
• Specialist infection management
• Genital dermatoses
• Coordination of partner notification
• Specialist HIV treatment and care
• Psychosexual / erectile dysfunction service (management / referral only)
• Provision and follow-up of post exposure prophylaxis for HIV

Specialist clinics for complex GUM patients

Staff

All but one staff member have contracts solely with the service, the exception is a family planning nurse employed by the PCT.

The % of staff within the service trained in providing contraception is as follows
The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

**Clinical network**

The service is a member of the South West London HIV & GUM Clinical Network (SWAGNET). The network is provider led and has commissioning involvement.

**Education and Training**

The service provides the following medical training:

- Undergraduate training for medical students
- Postgraduate training for various grades of junior doctors and GPs
- STIF course for primary care funded by Wandsworth PCT

The service provides the following nursing training:

- Postgraduate training for family planning nurses, midwives and practice nurses

Training is also provided for:

- School students
- At youth centres

**Service changes**

In 2008/09 the following new investment is occurring:

- The Point under 19 service will increase its opening hours for services up to Level 3.
- A nurse-led asymptomatic screening service will commence in a community site with a locally agreed tariff.

Potential unfunded changes include the introduction of point of care HIV testing, a Level 3 service for gay men, increased out of hours capacity and further nurse-delivered asymptomatic screening services.

Service gaps / constraints / plans include:

- The current IT system is not fit for purpose to provide GUMMAM data. It is being replaced August 2008
West Middlesex University Hospital NHS Trust  
Sexual Health Clinic

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Sexual Health Clinic is part of the West Middlesex NHS Trust. The service is consultant led and commissioned by Hounslow PCT. It was funded by PbR 2007/8 and onwards with the service level agreement in relation to activity for 2008/9 set at 2007/8’s outturn.

Access

The services have their doors open for 31 hours per week. Of these hours, 5 hours are provided after 7 pm. The service offers mixed access by walk-in and appointments: 60% of patients are walk-in and 40% attend by appointments. Patient numbers are capped in the walk-in service and approximately once a week the doors are closed prematurely. Data is not collected on patients ‘turned away’. Triage is conducted by senior nursing staff and emergency patients are seen.

In 2007/08 it is estimated that 95% of patients self-referred, 3% were referrals from primary care and 2% referrals from secondary care.

The service is advertised in service leaflets, local media and via websites.

Activity

In 2007/08 there were 14,664 attendances at the service. Of these 5,101 were new / first attendances. There is no data on the percentage who were under 25 years. The new to follow-up ratio was 1.0.65

The DNA rate for new appointments in 2007/08 was 3.1% and for follow-up appointments 9.4%

In 2007/08 % attendance by PCT of residence was not provided.

Premises

The service is delivered from premises that are considered ‘fit for purpose”. However a major refurbishment is planned to improve the infrastructure in Spring 2009.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Cervical screening and referral
- Screening and vaccination for Hepatitis B
- chlamydia screening for men and women under 25 years as part of the NCSP

Level 2

- IUD insertion and removal
- Symptomatic STI testing and treatment (men & women)
Level 3

- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: prison outreach (Feltham Young offenders Institution
- Specialist services for ‘at risk’ groups: young people and CSWs
- Genital dermatoses
- Coordination of partner notification
- Difficult IUD insertion and removal
- Specialist HIV treatment and care
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>51%</td>
<td>22%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>51%</td>
<td>22%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>30%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>45%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>11%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>11%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North West London Sexual Health Network. Dr Gary Brook is the clinical lead and Melanie Britton the Network Manager. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Postgraduate training for various grades of junior doctors
- SpR training (rotation with Chelsea & Westminster Hospitals)
- Outreach training for chlamydia screening for GPs and practice nurses

The service provides the following nursing training:

- Pre-registration student nurse
- Post-registration nurses
- In-house training for nurses

From October 2008 the service will be responsible for the clinical governance for Hounslow PCT.

Service changes

In 2008/09 there are planned funded service changes with the appointment of new consultant partially funded by the PCT to further develop community services. In addition, opening hours will be examined to increase access to the service.

No service gaps / constraints were identified.
Haringey PCT
St Ann’s Hospital
St Ann’s Sexual Health Centre

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

St Ann’s Sexual Health Clinic is part of St Ann’s Hospital. The service is consultant led and was funded via Haringey PCT on a block contract in 2007/08 but will be funded on PbR in 2008/09.

Access

The services provide integrated GUM and contraceptive services and have their doors open for 40.5 hours per week. Of these hours, 2 hours are provided after 7pm.

The service offers mixed access: 20% of patients are walk-in and 80% appointments. Walk-in is only provided for young people and CSWs. The service does not cap numbers. In extreme circumstances the doors may have to shut early. Data is not collected on patients ‘turned away’. Symptomatic patients are triaged by clinical staff and urgent cases will always been seen on the same day.

In 2007/08 it is estimated that 99% of patients self-referred, 1% were referrals from primary care and 0.5% referrals from voluntary/third sector agencies.

The service is advertised in service leaflets, via NHS Direct and websites.

Activity

In 2007/08 there were 16,093 attendances at the service. Of these 11,058 were new / first attendances, and of these 24.1% were under 25 years. The new to follow-up ratio was 1:0.3.

The DNA rate for new appointments in 2007/08 was 16.9% and follow-up appointments was 28.6%.

In 2007/08 % attendance by PCT of residence is listed below (note for 25% of patients the PCT of residence was unassigned):

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.6%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.04%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.1%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.2%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>3.3%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.01%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.03%</td>
</tr>
<tr>
<td>Enfield</td>
<td>21.4%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0%</td>
</tr>
<tr>
<td>Haringey</td>
<td>65.1%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.02%</td>
</tr>
<tr>
<td>Havering</td>
<td>0%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0%</td>
</tr>
<tr>
<td>Islington</td>
<td>1.5%</td>
</tr>
</tbody>
</table>
Kensington & Chelsea 0%
Kingston 0%
Lambeth 0%
Lewisham 0%
Newham 0%
Redbridge 0%
Richmond & Twickenham 0%
Southwark 0%
Sutton & Merton 0%
Tower Hamlets 0.3%
Waltham Forest 2.1%
Wandsworth 0%
Westminster 0.05%
Outside London Unknown%

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. There is insufficient clinical space, the infrastructure is poor and access by public transport is difficult.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: weekly young people, CSW weekly
- Specialist services for ‘at risk’ groups: dedicated Turkish clinic
- Specialist infection management
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual/erectile dysfunction services
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>75%</td>
<td>50%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>38%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>25%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>38%</td>
<td>0%</td>
</tr>
</tbody>
</table>
The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>25%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the embryonic North Central Clinical Network. Dr Eva Jungman is Clinical Lead. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Postgraduate training for various grades of junior doctors

The service provides the following nursing training:

- Pre-registration placements for student nurses and midwives

The service provides clinical governance for the PCT Sexual Health LES contracts.

Service changes

In 2008/09 the following changes have been funded:

- Development of Level 2 services in the community.
- Mainstreaming of 4YP mobile.
- Development of electronic clinical record across all services.

Additionally the service will work to further integration of services through joint appointments and dual trained workers

Service gaps / constraints include:

- Clinical facilities, business case being developed
- Lack of dual trained staff
- Difficulties in recruiting health advisors for out of hours and outreach work
Enfield PCT Provider Services
Town Clinic

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Town Clinic is part of Enfield PCT Provider Services. The service is delivered as part of an integrated Reproductive and Sexual Health service which is consultant led and commissioned by Enfield PCT. It was funded by a block contract in 2007/8 and again in 2008/9 although the PCT will be subject to the usual London billing arrangements.

Access

The services have their doors open for 31 hours per week. Of these hours, 3 are provided after 7pm,

The service offers mixed access with 80% being walk-in and 20% appointment services. Patient numbers are regularly capped based on staffing levels and regularly (more than 5 times a week) has to close to patients (turn patients away). The service does not collect data on patients turned away. However walk-in patients are triaged and emergency patients always seen.

In 2007/08 the service estimates that 50% of patients self-referred, 30% were referrals from primary care, 3% referrals from secondary care, 2% referrals from voluntary / third sector agencies and 15% were referrals from other sources.

The service is advertised in service leaflets and the trust website.

Activity

In 2007/08 there were 7,425 attendances at the service. Of these 5,678 were new / first attendances, and of these it is estimated that 60% were under 25 years. The new to follow-up ratio was 1:0.24

The DNA rate in 2007/08 is unknown.

In 2007/08 % attendance by PCT of residence is not known. However it is estimated that approximately 70% of attendances were from Enfield PCT residents.

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. The reception area does not afford privacy, the waiting area is too small and record storage is problematic.

Services offered:

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Screening and vaccination for Hepatitis B
- Chlamydia screening as part of the NCSP
Level 2
- IUD insertion and removal (infrequent)
- Implanon insertion (infrequent)
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Specialist services for ‘at risk’ groups: young peoples service
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Provision and follow-up of post exposure prophylaxis for HIV (assessment and referral only)
- Sexual assault services

The service also provides counselling service for young people. Level 3 contraception is available via the family planning part of the service. In addition the service hosts the chlamydia screening programme for Enfield and Haringey PCTs.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>70%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>70%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>80%</td>
<td>30%</td>
</tr>
</tbody>
</table>

While the service does not provide chlamydia screening as part of the NCSP, 100% of staff is trained to provide treatment as part of the NCSP.

Clinical network

The service is a member of the North Central Sector Network. Dr Eva Jungman is the Clinical Lead. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- GP CME training
- In-house training for medical staff
- Teaching on STIF course

The service receives no funding for this.

The service provides the following nursing training:

- Nursing placements
- In-house training for nurses
The service receives no funding for these.

The Consultant also sometimes teaches at:

- LSHTM and UCL

No remuneration is received for this.

**Service changes**

In **2008/09** the service will receive new investment for the following:

- Two outreach nurses to support the Reproductive Sexual Health service. Investment from PCT and Local Authority

If resourced the service would like to provide Level 1 GUM to all patients attending contraception and abortion clinics.

**Service gaps / constraints / plans include:**

- Funding under block contract has resulted in no investment in the service. Until PbR is implemented this will continue.
- Infrastructure: clinic building is only available for the next 6 months; new premises have not yet been identified
- IT: new software has been implemented but there are serious problems with it.
Queen Elizabeth Hospital NHS Trust
Trafalgar Clinic for Sexual Health

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Trafalgar Clinic for Sexual Health is part of the Queen Elizabeth Hospital NHS Trust. The service is consultant led and commissioned by Greenwich Teaching PCT. It was funded by PbR in 2007/8.

Access

The services have their doors open for 43 hours per week. Of these hours, 1 is provided after 7pm.

The service offers mixed access by walk-in and appointments. Approximately 65% of patients walk-in and 35% are seen by appointment. The service does not cap walk-in attendances and will exceptionally turn patients away if there is staff shortage. This decision is made by senior clinical staff. Data is not routinely collected on the number of patients turned away. Emergency patients are usually seen at presentation. Particular groups of people are fast tracked through the clinic at all times, these include: under 16s and commercial sex workers.

In 2007/08 it is estimated that 80% of patients self-referred, 10% were referrals from primary care, 5% referrals from secondary care and 5% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets and on websites. There is currently no budget for external advertising.

Activity

In 2007/08 there were 18,441 attendances at the service. Of these 11,698 were new / first attendances, and of these it is not known what % were under 25 years. The new to follow-up ratio was 1: 0.58

The DNA rate for new appointments in 2007/08 was 4% and for follow-up appointments was 9%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.4%</td>
</tr>
<tr>
<td>Barnet</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Bexley</td>
<td>22.3%</td>
</tr>
<tr>
<td>Brent</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Bromley</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Camden</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.4%</td>
</tr>
<tr>
<td>Ealing</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Enfield</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>60%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Haringey</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0%</td>
</tr>
<tr>
<td>Havering</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>&lt;0.1%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.1%</td>
</tr>
</tbody>
</table>
Kensington & Chelsea <0.1%
Kingston <0.1%
Lambeth 0.4%
Lewisham 7.2%
Newham 0.4%
Redbridge 0.1%
Richmond & Twickenham <0.1%
Southwark 1.2%
Sutton & Merton <0.1%
Tower Hamlets 0.3%
Waltham Forest 0.2%
Wandsworth 0.1%
Westminster 0.1%
Outside London 3.4%

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. There is inadequate clinical and administrative space.

Services offered:

**Level 1**
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

**Level 2**
- Symptomatic STI testing and treatment (men & women)

**Level 3**
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach; HMP Belmarsh 3/4 clinics per week for STI services, monthly HIV clinic, weekly outreach to local school EHC and sexual health advice, support to gay men’s worker
- Specialist services for ‘at risk’ groups: gay men
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service (limited)
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Specialist clinics for complex GUM patients

**Staff**

All staff have contracts solely with the service. There are no jointly appointed staff.
The % of staff within the service trained in providing contraception is as follows: much of the contraception is delivered in shared services with family planning. HIV positive women can access depo.

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>Data not provided</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>Data not provided</td>
<td>Data not provided</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>Data not provided</td>
<td>Data not provided</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>Data not provided</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>Data not provided</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the South East Thames Network. Dr Michael Brady is the clinical lead. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Undergraduate training for students
- Postgraduate training for various grades of junior doctors and GPs
- STIF course for primary care

The service provides the following nursing training:

- Student nurse and student midwife attachments
- Practice nurses
- In-house training packages for core GUM skills

Service changes

In 2008/09 there are no planned new developments

Service gaps / constraints / plans include:

- A business case has been developed with the trust to support a 20% increase in attendances over two years, with funding for clinical and administrative staff and local promotion of the service
- Investment is also required in the IT system (Mills) to provide an electronic link between the laboratory services and the clinical records
- There are significant difficulties in recruiting staff with IT skills
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Tudor Clinic is part of Hillingdon Hospital NHS Trust. The service is consultant led and commissioned by Hillingdon PCT. It was funded by PbR from 2007/8 onwards.

Access

The services have their doors open for 40.5 hours. Of these hours, 1 hour is provided after 7 pm.

The service offers mixed access by walk-in and appointments: 70% of patients are walk-in and 30% attend by appointments. Demand far exceeds the number of appointments available and the clinic does have to close to patients. The decision is made by senior medical staff. Data is not collected on patients ‘turned away’. Triage is conducted by senior nursing staff.

In 2007/08 it is estimated that 90% of patients self-referred, 2% were referrals from primary care, 7% referrals from secondary care and 0.5% referrals from voluntary / third sector agencies and 0.5% referrals from HMP Harmondsworth Detention Centre.

The service is advertised in service leaflets.

Activity

In 2007/08 there were 9,576 attendances at the service. Of these 4,885 were new / first attendances of these 27.3% were under 25 years. The new to follow-up ratio was 1: 0.96

The DNA rate for new appointments in 2007/08 was 9.6% and for follow-up appointments 23.5%

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.02%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.2%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.31%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.13%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.05%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.03%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.04%</td>
</tr>
<tr>
<td>Ealing</td>
<td>4.7%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.06%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.04%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.12%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.06%</td>
</tr>
<tr>
<td>Harrow</td>
<td>1.36%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.06%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>55%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>1.05%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.02%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>0.01%</td>
</tr>
<tr>
<td>Kingston</td>
<td>0.04%</td>
</tr>
</tbody>
</table>
Lambeth 0.04%
Lewisham 0%
Newham 0.12%
Redbridge 0.05%
Richmond & Twickenham 0.01%
Southwark 0.07%
Sutton & Merton 0.03%
Tower Hamlets 0%
Waltham Forest 0.05%
Westminster 0.12%
Outside London 36.45%

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. There are significant clinical space limitations, resulting in patients waiting for rooms. The layout is sub-optimal and was not originally designed for clinical use.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Specialist services for ‘at risk’ groups: young people
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>75%</td>
<td>0%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:
<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>50%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>30%</td>
</tr>
</tbody>
</table>

**Clinical network**

The service is a member of the North West London Sexual Health Network. Dr Gary Brook is the clinical lead and Melanie Britton the Network Manager. The network is provider led and has commissioning involvement.

**Education and Training**

The service provides the following medical training:

- Postgraduate training for various grades of junior doctors

The service provides the following nursing training:

- In-house training for nurses

**Service changes**

In 2008/09 there are no planned funded service changes. A young person’s clinic will be introduced and non-invasive dual testing for chlamydia and gonorrhoea will be introduced. An open access STI service for HIV patients attending the Tudor Centre will also be implemented.

Service gaps / constraints / plans include:

- IT support to facilitate effective use of IT systems
- Funding for enhanced contraceptive support to young peoples services
- Funding for non-career grade medical staff to increase capacity
- Storage space for clinical records
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Victoria Clinic for HIV and Sexual Health is located at the South Westminster Centre and is part of the Chelsea & Westminster Hospital’s services for sexual health and HIV. The service is consultant led and commissioned by Kensington & Chelsea PCT. It was funded by PbR from 2007/8.

Access

The services have their doors open for 47 hours per week. Of these hours, 9 are provided after 7pm at night or on a Saturday.

The service offers mixed access of walk-in and appointments. The service does not cap numbers or turn patients away. Emergency patients are triaged by phone or in person on review. Data is not collected on patients ‘turned away’.

In 2007/08 it is estimated that 81% of patients self-referred, 0.1% were referrals from primary care, 16.1% referrals from secondary care and 0% referrals from voluntary / third sector agencies. 2.4% of referrals came from an unknown source.

The service is advertised in service leaflets, posters on websites and via NHS Direct.

Activity

In 2007/08 there were 23,832 attendances at the service. Of these 18,282 were new / first attendances, and of these 22% were under 25 years. The new to follow-up ratio was 1:0.3

The DNA rate for new appointments in 2007/08 was 14% and follow-up appointments was 16%.

In 2007/08 % attendance by PCT of residence is listed below.

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.22%</td>
</tr>
<tr>
<td>Barnet</td>
<td>1.07%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.28%</td>
</tr>
<tr>
<td>Brent</td>
<td>1.74%</td>
</tr>
<tr>
<td>Bromley</td>
<td>1.13%</td>
</tr>
<tr>
<td>Camden</td>
<td>2.96%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>2.53%</td>
</tr>
<tr>
<td>Croydon</td>
<td>1.43%</td>
</tr>
<tr>
<td>Ealing</td>
<td>1.48%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.76%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.92%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>3.59%</td>
</tr>
<tr>
<td>Haringey</td>
<td>2.12%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.37%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.19%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.25%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>1.05%</td>
</tr>
<tr>
<td>Islington</td>
<td>3.28%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>3.76%</td>
</tr>
</tbody>
</table>
Kingston 0.23%
Lambeth 13.42%
Lewisham 2.1%
Newham 1.09%
Redbridge 0.56%
Richmond & Twickenham 0.60%
Southwark 5.15%
Sutton & Merton 1.07%
Tower Hamlets 3.07%
Waltham Forest 1.57%
Wandsworth 5.66%
Westminster 16.96%
Outside London 19.55%

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. The clinical area was designed for 600 attendances per month and there are currently 2000. Storage space is grossly inadequate for clinical records and there is damp in the laboratory.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: weekly STI/HIV testing in university student clinic, three times weekly Hep B vax and Hep B /HIV testing in Soho, weekly STI/HIV testing in Soho primary care, weekly blood borne virus screening and vaccination in homeless hostels
- Specialist services for ‘at risk’ groups: MSM, contact clinics for young people in local education settings, residents of homeless hostels
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Difficult IUD insertion and removal
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Specialist clinics for complex GUM referrals
Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>100%</td>
<td>25%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>10%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>Data not provided</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>Data not provided</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North West Sector Network. Dr Gary Brook is the clinical lead and Melanie Britton the Manager. The network has commissioning involvement.

The Victoria clinic also provides clinical governance for the Dr Thom on line erectile dysfunction service.

Education and Training

The service provides the following medical training:

- Undergraduate training for students from Imperial College Medical School
- Postgraduate training for various grades of junior doctors

The service provides the following nursing training:

- Pre-registration placements for student nurses from TVU

The service also provides:

- Ad hoc clinical placements for overseas medical staff
- Voluntary sector and alternative provider training
- Education in schools and colleges

Service changes

In 2008/09 there are no planned service changes.

Service gaps / constraints / plans include:

- Desire to develop “one stop shop” model
- Limitation in family planning through inability to prescribe implanon
- Inadequate space
West London Centre for Sexual Health  
Charing Cross Hospital  
(Imperial College Healthcare NHS Trust)

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The West London Centre for Sexual Health is based at Charing Cross Hospital. However, the service is delivered as part of the sexual health services provided by Chelsea & Westminster Hospital NHS Foundation Trust. The service is consultant led and commissioned by Hammersmith & Fulham PCT and was funded by PbR from 2007/8.

Access

The services have their doors open for 44.5 hours per week. Of these hours, a 5 hour session is offered on Saturday mornings.

The service offers mixed access: 25% of clinics are walk-in and 75% appointments. The service does not cap numbers or turn patients away. Emergency patients are triaged by phone or in person on review. Data is not collected on patients ‘turned away’.

In 2007/08 it is estimated that 80% of patients self-referred, 10% were referrals from primary care, 5% referrals from secondary care and 5% referrals from voluntary / third sector agencies.

The service is advertised in service leaflets, on websites, via NHS Direct and through targeted GPs.

Activity

In 2007/08 there were 19,684 attendances at the service. Of these 15,358 were new / first attendances, and of these 34% were under 25 years. The new to follow-up ratio was 1:0.28

The DNA rate for new appointments in 2007/08 was 15% and follow-up appointments was 17%.

In 2007/08 % attendance by PCT of residence is listed below.

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.04%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.4%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.1%</td>
</tr>
<tr>
<td>Brent</td>
<td>2.07%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.08%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.63%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.6%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0.17%</td>
</tr>
<tr>
<td>Ealing</td>
<td>9.57%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.27%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.18%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>40.95%</td>
</tr>
<tr>
<td>Haringey</td>
<td>0.67%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.23%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.07%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.51%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>5.57%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.74%</td>
</tr>
</tbody>
</table>
Kensington & Chelsea 4.1%
Kingston 0.25%
Lambeth 1.85%
Lewisham 0.42%
Newham 0.41%
Redbridge 0.08%
Richmond & Twickenham 1.9%
Southwark 0.66%
Sutton & Merton 0.73%
Tower Hamlets 0.75%
Waltham Forest 0.53%
Wandsworth 3.92%
Westminster 1.71%
Outside London 19.81%

Premises

The service is delivered from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach: Wormwood Scrubs (STI, HIV, Hep B), K4S (STI screening in GP practice), SW5 (HIV and sexual health screening), West London College
- Specialist services for ‘at risk’ groups: W6 for MSM, contact clinics for young people in local education settings
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Difficult IUD insertion and removal
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Saturday morning service for GUM and specialist clinics for complex GUM referrals

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.
The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>40%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>20%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>10%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North West Sector Network. Dr Gary Brook is the Clinical Lead and Melanie Britton the Network Manager. The network has commissioning involvement.

Education and Training

The service provides the following medical training:

- Undergraduate and postgraduate training for multiple disciplines including primary care

The PCT have provided locum costs to encourage uptake in primary care

The service provides the following nursing training:

- Pre-registration placements for student nurses from TVU
- Post-registration training focuses in family planning

The service also provides:

- Ad hoc clinical placements for overseas medical staff
- Voluntary sector and alternative provider training
- Education in schools and colleges

Service changes

In 2008/09 the service will receive increased funding to:

- Provide Level 1 services in 3 outreach settings: River House, EHF College and Connections.

Service gaps / constraints / plans include:

- Additional funding for staff to develop more services
- Additional funding for infrastructure improvement
- Desire to develop “one stop shop” model
- Limitation in family planning through inability to prescribe implanton or hormonal patches
- IT system is under review
- Further training of nursing staff in use of PGDs
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The department of Sexual Health is part of Whipps Cross University Hospital. The service is consultant led and was commissioned by Waltham Forest PCT. In 2007/8 funding was by PbR.

Access

The services have their doors open at for 38 hours per week, of which 1 hour is after 7pm.

The service offers mixed access with a walk-in service three days per week and activity is capped depending on staff availability. All attempts are made to triage patients into appointments within 48 hours. Data is collected on “turn aways” and in 2007/8 an average of 70 patients were turned away each week. This figure is now 100 per week. Emergency patients are triaged by a health advisor or nurse and seen as appropriate.

In 2007/08 it is estimated that 90% of patients self-referred, 5% were referrals from primary care, 2.5% referrals from secondary care and 2.5% referrals from voluntary / third sector agencies.

The service is advertised by websites.

Activity

In 2007/08 there were 7,623 attendances at the service. Of these 3,816 were new / first attendances, and of these 33% were under 25 years. The new to follow-up ratio was 1:0.8

The DNA rates are not known

In 2007/08 % attendance by PCT of residence is listed below (note for 25% of patients the PCT of residence was unassigned):

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.9%</td>
</tr>
<tr>
<td>Barnet</td>
<td>0.1%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.1%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0%</td>
</tr>
<tr>
<td>Camden</td>
<td>0%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>1.8%</td>
</tr>
<tr>
<td>Croydon</td>
<td>0%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0%</td>
</tr>
<tr>
<td>Enfield</td>
<td>1%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.3%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0%</td>
</tr>
<tr>
<td>Haringey</td>
<td>1%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.7%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.1%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>0%</td>
</tr>
<tr>
<td>Kingston</td>
<td>0%</td>
</tr>
</tbody>
</table>
Lambeth 0.2%
Lewisham 0%
Newham 5.9%
Redbridge 13.4%
Richmond & Twickenham 0%
Southwark 0.3%
Sutton & Merton 0%
Tower Hamlets 0.7%
Waltham Forest 66%
Wandsworth 0%
Westminster 0%
Outside London 6%

Premises

The service is delivered from premises that are not considered ‘fit for purpose’ with limited clinical and administrative space.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Point of care HIV testing
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Screening and vaccination for Hepatitis B

Level 2
- Symptomatic STI testing and treatment (men & women)

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Specialist infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

No outreach or targeted services are provided

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>75%</td>
<td>90%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>75%</td>
<td>90%</td>
</tr>
<tr>
<td>Implant fitting and/or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and/or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>
The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>unknown</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>unknown</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the North East London Sexual Health Network. Dr Celia Skinner is the Clinical Lead and Tracy Stannard is the Network Manager. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Post graduate training for FY2
- Undergraduate medical training for Queen Mary’s University

SIFT funding is included in the baseline budget although the amount is unclear.

The service provides the following nursing training:

- Pre-registration placements for student nurses

Service changes

In 2008/09 the service will receive increased funding to:

- Increase staffing (staff grade, nurse practitioner etc)
- to facilitate texting of results

Service gaps / constraints / plans include:

- Inability to provide family planning to HIV positive patients
- No young peoples service, this will commence once core service is stabilised
- Negotiations with trust to improve clinical premises are ongoing
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Wolverton Clinic is part of Kingston Hospital NHS Trust. The service is consultant led and commissioned by Kingston PCT. It was funded on a block contract in 2007/8. Funding was moved to PbR in 2008/9.

Access

The services have their doors open for 40 hours per week. Of these hours, 1.5 are provided after 7pm.

The service offers mixed access by walk-in and appointments. Approximately 60% of patients walk-in and 40% are seen by appointments. The service does not cap patient numbers or have to close prematurely. No data for this is therefore collected. Emergency patients are triaged by nursing staff and seen in the current or next session.

In 2007/08 it is estimated that 84% of patients self-referred, 9% were referrals from primary care and 2% referrals from secondary care.

The service is advertised in service leaflets, via NHS Direct and on websites and relevant media.

Activity

In 2007/08 there were 13,941 attendances at the service. Of these 10,322 were new / first attendances, and of these it is estimated that 50% were under 25 years. The new to follow-up ratio was 1:0.35.

The DNA rate for new appointments in 2007/08 was 5% and for follow-up appointments was 11%. In 2007/08 the service was unable to provide % attendance by PCT of residence.

Premises

The service is delivered from premises that are not considered ‘fit for purpose’. There is a planned relocation in autumn 2008 to refurbished accommodation on the Kingston Hospital site which will double clinical space,

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B

Level 2
- IUD insertion and removal (including emergency IUD)
- Symptomatic STI testing and treatment (men & women)
Level 3

- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Specialist services for ‘at risk’ groups: young people, weekly with the Point, weekly MSM clinic K2
- Specialist Infection management
- Genital dermatoses
- Coordination of partner notification
- Specialist HIV treatment and care
- Psychosexual / erectile dysfunction service
- Provision and follow-up of post exposure prophylaxis for HIV
- Sexual assault services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows: much of the contraception is delivered in shared services with family planning. HIV positive women can access depo.

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>60%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>60%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>62%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>25%</td>
</tr>
</tbody>
</table>

Clinical network

The service is a member of the SWAGNET. Dr Richard Lau is the clinical lead and Janine Railton is the manager. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Postgraduate training for various grades of junior doctors and GPs
- STIF course for primary care

The service provides the following nursing training:

- Pre-registration nurses and midwives
- Post-registration nurses

Service changes

In 2008/09 there no funded service changes, although staffing has temporarily been increased to facilitate 48 hour access compliance.

Service gaps / constraints / plans include:

- Kingston PCT announced in autumn 2007 that sexual health services would be tendered to develop an integrated model. Timescales have shifted and there is now an expectation that bids will be submitted in early 2009.
London CSRH services

Barnet PCT
Reproductive Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Barnet PCT Reproductive Health Service is part of Barnet Primary Care Trust. The service is associate specialist led and is funded via Barnet PCT on a block contract.

Access

The service has its doors open for 70 hours per week, delivered in a variety of settings. Of the 70 hours, 30 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 10% of clinics being walk-in and 90% being appointment clinics. The service sometimes caps numbers at walk-in clinics. The decision to cap numbers is at the discretion of reception staff in collaboration with the clinical team. The service rarely closes to patients (turns patients away). No data is collected on the number of patients this affects.

In 2007/08 it is estimated that 88% of patients self-referred, 5% were referrals from primary care, 5% referrals from secondary care and 2% referrals from voluntary / third sector organisations.

The service is advertised in service leaflets, on Barnet PCT website, on the FPA website, on the Barnet Borough Council website and via NHS Direct.

Activity

There was no data provided on attendances in 2007/08.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown.

Premises

The service is delivered from a number of sites many of which are not fit for purpose. Main concerns relate to poor clinical areas and shared rooms.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men & women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
• Screening and vaccination for Hepatitis B
• Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive implant insertion and removal
• Symptomatic STI testing and treatment (men & women)
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive outreach on a 1:1 basis as required
• 3 Young People’s clinics
• Menopause Clinic
• Fertility awareness clinic
• Highly specialised contraception
• Difficult IUD insertion and removal
• Psychosexual / erectile dysfunction service

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>50%</td>
<td>10%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>50%</td>
<td>10%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>8%</td>
<td>5%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP and 100% of staff is trained to provide treatment.

Clinical network

The service is not a member of a clinical network.

Education and Training

The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) in Intra Uterine Techniques
• Letter of Competence (LoC) in subdermal implants
• Ad hoc undergraduate sessions

The service receives approximately £3000 per annum from trainees for DFSRH and £2000 for the LoC IUT and the LoC SdI. No funding is received for undergraduate training.

The service provides the following nursing training:

• Practical training for the post-registration family planning course
• Training in the fitting of IUDs and implants
• Training in Independent Nurse Prescribing

The service received no funding for nurse training.

The service also provides regular contraceptive updates for which no funding is received.

Service changes

There are no planned service changes in 2008/09.
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Bexley PCT Contraception Service is part of the Bexley Primary Care Trust. The service is a young people’s service that is associate specialist led and is funded via Bexley PCT on a block contract. Service level agreements are in place relating to the numbers of clinics provided, the numbers of patients seen and chlamydia screening undertaken.

Access

The service has its doors open for 20.5 hours per week delivered in a variety of settings. Of the 20.5 hours, 1 is after 7 pm.

100% of services are walk-in. Walk-in clinic numbers are not capped and the service does not have to turn patients away. Emergency patients are always seen.

In 2007/08 the service estimates that 75% of patients self-referred and that 25% were referred from primary care.

The service is advertised in posters, Wise Up leaflets, via the Bexley PCT website, via a dedicated phone line and in a local football club’s programme.

Activity

In 2007/08 there were approximately 2,573 attendances at the service. Of these 1,531 were first attendances and of those 100% were under 25 years of age.

In 2007/08 % the service was unable to provide data on attendance by PCT of residence.

Premises

The service operates from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Health promotion
- Condom distribution
- Hormonal contraception / Depo-Provera
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal

Staff

All staff has contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:
Medical Staff | Nursing staff
----------------|-----------------|
Provision of hormonal contraception | 100% | 100% |
Administration of Depo-Provera | 100% | 100% |
Implant fitting and / or removal | 100% | 15%  |
IUD fitting and / or removal | 100% | 15%  |

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

Medical Staff | Nursing staff
----------------|-----------------|
STI testing | 0% | 0% |
STI treatment | 0% | 0% |
Specialist infections management (Level 3) | 0% | 0% |

100% of staff is trained in chlamydia screening as part of the NCSP. Treatment is not offered as part of the NCSP.

Clinical network

The service is not a member of a clinical network.

Education and Training

The service provides no medical training.

The service provides the following nursing training:

- Post-registration family planning changes

The service receives no payment for the above.

Service changes

In 2008/09 the PCT are undertaking a review of young people’s sexual health services in Bexley PCT. This may result in additional funding and services. Meanwhile the service will provide clinics in two extended schools from September 08, increase the condom card outlets and provide treatment as part of the NCSP. The provider will deliver these additional services without further investment.

Service gaps / constraints include:

Lack of IT; the service is not computerised
Brent PCT
Contraceptive & Reproductive Health Service
(provided by Westside Contraceptive Services)

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Westside Contraceptive service is part of Westminster PCT. The service is consultant led and is funded via Westminster, Hammersmith & Fulham and Kensington & Chelsea PCTs with Hammersmith & Fulham PCT being the lead commissioner. The service is funded on block contracts with each of the PCTs. Until 1st June 2008 Brent PCT commissioned Westside Contraceptive Services as their provider however from 1st June 2008 Brent have moved to commissioning services from Camden PCT.

Access

Between 2006 and 2008 service funding and sites for services were reduced with an overall loss of 13 clinic sessions.

In 2007/08 the service had its doors open for 54 hours per week, with services delivered in a variety of settings. Of the 50 hours, 4 were after 7 pm at night and / or at the weekend.

In 2007/08 the service estimated that 83% of patients self-referred, 10% were referrals from primary care, 2% were referrals from secondary care and 5% were referrals from the voluntary / third sector.

Activity

In 2007/08 there were 13,114 attendances at the service. Of these 7,642 were first attendances with 23% of these being under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 data on % attendance by PCT of residence was not collected.

Premises

The service considered that its premises were not ‘fit for purpose’ as some sites had problems with reception facilities and IT, space and privacy, equipment and storage.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal

Staff

Details no longer applicable.

100% of staff were trained in chlamydia screening as part of the NCSP with treatment not provided as part of the NCSP.

Clinical network

The service was not a member of a clinical network.

Service changes

In 2008/09 the service has been commissioned from Camden PCT.
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Bromley PCT Contraception & Reproductive Health Service is part of Bromley Primary Care Trust. The service is associate specialist led and is funded via Bromley PCT on a block contract.

Access

The service has its doors open for 16 hours per week delivered in a variety of settings. Of the 16 hours, 10 are after 7 pm at night and on a Saturday.

The service offers mixed access with 85% of services being walk-in and 15% appointment clinics for LARC procedures and specialist advice. All patients access the service via walk-in clinics and if an appointment is required will be brought back. Walk-in clinic numbers are capped and calculated on the number of clinician hours available at each session. The service sometimes has to turn away a number of non-emergency patients who are then directed to the next available clinic. Emergency patients are always seen. Data is not collected on numbers of patients turned away but this occurs at 5-10% of sessions.

In 2007/08 the service estimates that 80% of patients self-referred, 10% were referred from primary care, 2% were referred from secondary care, and 8% were referred from voluntary or third sector agencies.

The service is advertised in service leaflets, the local paper, a 24-hour recorded information line and by signposting from other NHS and voluntary / 3rd sector services. It is also advertised via Bromley PCT, fpa and sexwise websites.

Activity

In 2007/08 there were approximately 10,200 attendances at the service. Approximately 5,360 of these were first attendances. Of those, 49% were under 25 years of age (extrapolated from final quarter 07/08 data).

The DNA rate for booked appointments in 2007/08 was 20-40%.

In 2007/08 % the service was unable to provide data on attendance by PCT of residence.

Premises

The service operates from premises which are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Health promotion
- Condom distribution
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Counselling and referral for vasectomy

**Level 3**
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• 3 dedicated Young Persons (up to age 23) clinics weekly at 3 different sites
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Psychosexual / erectile dysfunction services

The service also provides a vasectomy service.

**Staff**

All staff has contracts solely with the service. There are no jointly appointed staff. Some staff work part-time for this service and at other services outside of the PCT.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>80% (1 doctor)</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff were trained in chlamydia screening as part of the NCSP with 95% of staff trained in providing treatment as part of the NCSP.

**Clinical network**

The service is not a member of a clinical network.

**Education and Training**

The service provides the following medical training:

• FSRH Letter of Competence (LoC) in Intra Uterine Techniques
• FSRH Letter of Competence (LoC) in subdermal implants
• GP updating and VTS training in sexual health if requested and time permitting

Bromley PCT funds training for GPs from LES practices. Trainees not working for the service or for LES GPs pay £250 for LoC training.

The service provides the following nursing training:

• Practical training for specialist contraception courses run by Kings College and Greenwich Universities
• RCN recognised training to the standard of FSRH LoC IUT and Sdi training for nurses working in Bromley PCT
• Theoretical updates for practice nurses and school nurses working in Bromley PCT

The service receives no payment for the above.
The service also provides training for:

- Pharmacists for PGDs for emergency contraception and chlamydia treatment (as part of the NCSP)

The service provides leadership and training for the shared Bromley-wide PGDs in use in community pharmacies.

**Service changes**

In **2008/09** the service is negotiating a part-time post to develop contraceptive outreach services

**Service gaps / constraints include:**

- Lack of IT; the service is not currently computerised but will be implementing the administrative element of RIO probably from January 2009 and the clinical element from April 2009
Camden & Islington PCTs
Sexual & Reproductive Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Camden PCT and Islington PCT Sexual & Reproductive Health Service is part of Camden Primary Care Trust. The service is consultant led and is funded by both Camden and Islington PCTs via block contract arrangements with service level agreements relating to activity in place.

Access

The service has its doors open for 180 hours per week delivered in a variety of settings. Of the 180 hours, up to 15 are after 7 pm at night and / or at the weekend.

The service offers mixed access, approximately 50% of patients being walk-in and 50% being seen in appointment clinics. Walk-in clinic numbers are not capped but the service estimates that patients are turned away (due to pressures of numbers attending) at approximately 5-10% of clinic sessions. Data is collected on the number of patients turned away; in 2007/08 approximately 6% of patients were turned away from walk-in clinics. All patients are triaged and all emergency patients will be seen.

In 2007/08 the service estimates that 93% of patients self-referred, 6% were referred from primary care, 0.5% were referred from secondary care and 0.5% were referred from voluntary or third sector agencies.

The service is advertised in service leaflets, on websites, in health centres and in schools.

Activity

In 2007/08 there were 38,371 attendances at the service. Of these 25,136 were first attendances with 8% of these being under 25 years of age.

The DNA rate for new appointments in 2007/08 was 4% and follow-up appointments was 8%.

In 2007/08 % attendance by PCT of residence is listed below for approximately 50% of attendances at the service. The other 50% of attendances are seen in clinics which are not fully computerised. The service estimates 70% of attendees to these clinics reside in either Camden or Islington PCT.

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barking &amp; Dagenham</td>
<td>0.3%</td>
</tr>
<tr>
<td>Barnet</td>
<td>2.8%</td>
</tr>
<tr>
<td>Bexley</td>
<td>0.5%</td>
</tr>
<tr>
<td>Brent</td>
<td>3.4%</td>
</tr>
<tr>
<td>Bromley</td>
<td>0.8%</td>
</tr>
<tr>
<td>Camden</td>
<td>16%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>5.8%</td>
</tr>
<tr>
<td>Corydon</td>
<td>0.8%</td>
</tr>
<tr>
<td>Ealing</td>
<td>1.9%</td>
</tr>
<tr>
<td>Enfield</td>
<td>1.3%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>1.1%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>2.7%</td>
</tr>
<tr>
<td>Haringey</td>
<td>5.1%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.5%</td>
</tr>
<tr>
<td>Havering</td>
<td>0.4%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.3%</td>
</tr>
</tbody>
</table>
Hounslow 0.8%
Islington 11.2%
Kensington & Chelsea 1.6%
Kingston 0.3%
Lambeth 4.8%
Lewisham 2.3%
Newham 1.6%
Redbridge 0.9%
Richmond & Twickenham 0.7%
Southwark 3.1%
Sutton & Merton 1.3%
Tower Hamlets 4.7%
Waltham Forest 2.5%
Wandsworth 4.4%
Westminster 8.7%
Outside London 28%

Premises

The service operates from a number of sites. There are issues relating to the quality of accommodation at some of these. Main concerns relate to small inadequately sized consulting rooms that are not suitable for disabled access and poor maintenance of some facilities.

Services offered:

Level 1
• Sexual history taking, risk assessment and signposting
• Asymptomatic STI testing and treatment
• Simple partner notification
• Pregnancy testing and counselling
• Referral for abortion
• Provision of emergency hormonal contraception
• Contraceptive information
• Health promotion
• Condom distribution
• Hormonal contraception / Depo-Provera
• Cervical screening and referral
• Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Symptomatic STI testing and treatment for women only
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• STI outreach for the NCSP
• Dedicated Young Persons clinics
• Coordination of partner notification
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Psychosexual / erectile dysfunction services

The service also provides a direct phone line for Primary Care to access advice and an advice line for service clients.

Staff
The service is managed with the Mortimer Market Centre and Archway Sexual Health Centre GUM / HIV services. As a consequence there is frequent staff exchange for the purposes of workforce development.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>70%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>95%</td>
<td>20%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>90%</td>
<td>30%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>10%</td>
<td>5%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 60% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the North Central London Sexual Health Network; sexual reproductive health services are led by Dr Janet Barter.

Education and Training

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Letter of Competence (LoC) in Intra Uterine Techniques
- Letter of Competence (LoC) subdermal implants
- RCOG Specialty training in Sexual reproductive health
- Faculty of Sexual Reproductive Health: NCCG training in SRH
- Sessions for undergraduates at UCL

The London Deanery funds RCOG trainees. UCL SIFT monies are paid to the trust.

The service provides the following nursing training:

- Basic practical contraceptive training at South Bank, City and Middlesex Universities
- Training for IUD/ IUS insertion / removal
- Training for subdermal implants

The service has contracts with the universities.

The service has formal arrangements to provide clinical governance to the Brandon Centre including support and appraisal for the lead doctor.

Service changes

In 2008/09 the service plans to:

- Streamline repeat contraception supplies to minimise the need to see a doctor or nurse and reduce time spent in the clinic.
- The service would like to increase its role in LARC provision and training if funding were made available.
The service is constrained by its relatively small management team with a small number of senior nurses which limits the ability to progress more rapidly.
General information

The City & Hackney PCT Community Sexual Health Service is part of City & Hackney Primary Care Trust. The service is consultant led and is funded via City & Hackney PCT on a block contract.

Access

The service has its doors open for 67 hours per week delivered in a variety of settings. Of the 67 hours, 7 are after 7 pm at night and / or at the weekend.

The service offers mixed access with both walk-in and appointment clinics. The service sometimes caps numbers at walk-in clinics depending on the number of staff available. Emergency patients will always be seen.

In 2007/08 it is estimated that 93-95% of patients self-referred, 3-5% were referrals from primary care, less than 1% referrals from secondary care with the % of referrals from voluntary / third sector organisations unknown.

The service is advertised in service leaflets, posters and on the City & Hackney PCT website.

Activity

In 2007/08 there were 15,365 attendances at the service. Of these 7,671 were first attendances. The service does not have data on what % of these were under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown. However it is estimated that 67.5% of attendances were City & Hackney PCT residents.

Premises

The main premises are fit for purpose although clinical space is lacking. Facilities at satellite clinics can be problematic as these are shared with other services.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women)
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B
- Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraception implant insertion and removal
• Symptomatic STI testing and treatment (man and women)
• Counselling and referral for vasectomy

**Level 3**

• Specialist level responsibility for provider quality, teaching and training and clinical governance
• STI outreach
• Contraception outreach on an ad hoc basis
• Specialist clinics for ‘at risk’ groups
• Specialist infection management
• Genital dermatoses
• Coordination of partner notification
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Psychosexual / erectile dysfunction service

The service also provides a clinic for medical abortions at the Homerton Hospital.

**Staff**

All staff has contracts solely with the service with the exception of a family planning nurse who manages the medical abortions at the Homerton. The nurse’s salary is recharged from the Homerton Hospital.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>20%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>20%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>10%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100% of staff trained in providing treatment as part of the NCSP.

**Clinical network**

The service is a member of the North East London HIV & Sexual Health Network. The Clinical Lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement.

**Education and Training**

The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) in Intra Uterine Techniques
• Letter of Competence (LoC) in subdermal implants

The service receives £250 from trainees for DFSRH, £300 for the LoC IUT and £300 for the LoC SdI.
The service provides the following nursing training:

- Practical training for the post registration the Family /Planning course at City University but receives no direct funding for this

The service also provides training for:

- Chlamydia screening training for local GPs and Pharmacists
- Training in partner notification
- HIV awareness training
- BASHH STIF Course

Service changes

Gaps have been identified in the provision of Saturday morning clinics, this will be provided by Clinicenta when it is up and running.

In 2008/09 the service is exploring development of emergency hormonal contraception Clinics in 6th Form Colleges.
General information

The Croydon PCT Contraception & Sexual Health Service is part of Croydon Primary Care Trust. The service is consultant led and is funded via Croydon PCT on a block contract with a service level agreement for 12,000 contacts in 2008/09.

Access

The service has its doors open for 45 hours per week delivered in a variety of settings. Of the 45 hours, 7.5 are after 7 pm at night and or at a weekend.

The service offers mixed access with 90% of services being walk-in and 10% ‘appointment clinics’ for IUD and implant procedures, teaching and psychosexual medicine. Walk-in Clinic numbers are capped and calculated on the number of clinician hours available at each session using FRSH guidelines. The service has to regularly turn away a small number of non emergency patients who are then directed to the local NHS walk-in centre. Emergency contraception and urgent GP referrals are always accommodated.

In 2007/08 the service estimates that 78% of patients self-referred, 15% were referred from primary care, 5% were referred from secondary care, and 2% were referred from voluntary or third sector agencies.

The service is advertised in service leaflets, via partnership working the local hospital, a South West London website for young people and the phone book.

Activity

In 2007/08 there were 10,093 attendances at the service. Of these approximately half were first attendances with 50% of these being under 25 years of age.

The DNA rate for new appointments in 2007/08 was 5% and follow-up appointments was 20%.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnet</td>
<td>0.04%</td>
</tr>
<tr>
<td>Brent</td>
<td>0.54%</td>
</tr>
<tr>
<td>Bromley</td>
<td>2.39%</td>
</tr>
<tr>
<td>Camden</td>
<td>0.01%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>0.03%</td>
</tr>
<tr>
<td>Croydon</td>
<td>85.83%</td>
</tr>
<tr>
<td>Ealing</td>
<td>0.01%</td>
</tr>
<tr>
<td>Enfield</td>
<td>0.01%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>0.07%</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham</td>
<td>0.14%</td>
</tr>
<tr>
<td>Harrow</td>
<td>0.03%</td>
</tr>
<tr>
<td>Hillingdon</td>
<td>0.07%</td>
</tr>
<tr>
<td>Hounslow</td>
<td>0.04%</td>
</tr>
<tr>
<td>Islington</td>
<td>0.04%</td>
</tr>
<tr>
<td>Kensington &amp; Chelsea</td>
<td>0.01%</td>
</tr>
<tr>
<td>Kingston</td>
<td>0.07%</td>
</tr>
<tr>
<td>Lambeth</td>
<td>2.63%</td>
</tr>
</tbody>
</table>
Premises

The service operates from ‘fit for purpose’ premises which have good disabled access and provide a good clinical environment. Main concerns relate to clinical pressures result in a requirement for room space beyond that available and a waiting room that is too small.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment
- Simple partner notification
- HIV testing (including pre test discussion and giving of results)
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Health promotion
- Condom distribution
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Contraceptive outreach provided: weekly at Connexions via Teenage Pregnancy funding; Weekly ‘4 All’ sexual health information and advice sessions plus condom distribution at 2 sites in collaboration with a voluntary sector provider via Teenage Pregnancy funding; Weekly ‘4 Lads’ sexual health information and advice sessions plus condom distribution with a voluntary sector provider via Teenage Pregnancy funding.
- 3 dedicated Young Persons clinics weekly
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult implant removal
- Psychosexual / erectile dysfunction services

The service also provides teaching on natural family planning, a domiciliary service and has a care pathway in place with the local GUM service for HIV positive women requiring contraception.

Staff

Most of the staff have contracts solely with the service with the exception of a specialist teenage pregnancy family planning nurse who also has an honorary contract with the acute provider and provides a session at the Mayday Hospital. Some staff work part time for this service and other services outside of the PCT.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Location</th>
<th>% of Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lewisham</td>
<td>0.68%</td>
</tr>
<tr>
<td>Newham</td>
<td>0.06%</td>
</tr>
<tr>
<td>Richmond &amp; Twickenham</td>
<td>0.01%</td>
</tr>
<tr>
<td>Southwark</td>
<td>0.47%</td>
</tr>
<tr>
<td>Sutton &amp; Merton</td>
<td>3.66%</td>
</tr>
<tr>
<td>Tower Hamlets</td>
<td>0.01%</td>
</tr>
<tr>
<td>Waltham Forest</td>
<td>0.07%</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>0.49%</td>
</tr>
<tr>
<td>Westminster</td>
<td>0.06%</td>
</tr>
<tr>
<td>Outside London</td>
<td>2.86%</td>
</tr>
</tbody>
</table>
Medical Staff  |  Nursing staff
---|---
Provision of hormonal contraception | 100%  | 100%
Administration of Depo-Provera | 100%  | 100%
Implant fitting and / or removal | 100%  | 50%
IUD fitting and / or removal | 100%  | 30%

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>10%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 10% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the South West London Sexual Health Network; contraceptive services are part of a subgroup. The network is provider led with Dr Paul Lister being Clinical Lead and Janine Railton being Network Manager. There is commissioning involvement in the network.

Education and Training

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Letter of Competence (LoC) Intra Uterine Techniques
- Letter of Competence (LoC) subdermal implants
- Sessions for St Georges and GKT medical students

The service receives £320 from trainees for DFSRH and £175 for LoCs. £25 - 30 per undergraduate session.

The service provides the following nursing training:

- Practical training for family planning course run at Kingston University
- Placements for Mayday Hospital midwifery and nursing pre-registration students

The service receives £300 from trainees for family planning course.

The service also provides training for:

- Pharmacists to use the emergency hormonal contraception

The service provides leadership for the shared Croydon-wide guidelines for contraception provision in the following settings: community pharmacy, general practice, GUM and gynaecology.

Service changes

In 2008/09 the service will receive increased funding for:

- Increasing access to LARCS.
- Increase cross cover with the NHS Walk-In Centre to increase capacity at Level 1.

The service would like to increase its role in STI testing and treatment if funding were made available. Access to computer terminals remains an issue in terms of the ability to move to an electronic booking system.
Ealing PCT
Reproductive & Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Ealing PCT Reproductive & Sexual Health Service is part of Ealing Primary Care Trust. The service is consultant led and is funded via Ealing PCT on a block contract.

Access

The service has its doors open for 45 hours per week delivered in a variety of settings. Most clinics doors are open for 1.5 hours per session with everyone walking in within that period being seen. Of the 45 hours, 14.5 are after 7 pm at night.

The service offers mixed access with 80% of services being walk-in and 20% appointment clinics. The service has to close to patients (turn patients away) at least once a week depending on staffing levels. The decision to close a session is taken by the most senior clinician present and is based on staffing levels (and skills) present and a triage of waiting clients and assessment of the number of these who can be seen safely. Clinics sometimes close doors temporarily to await progress through clients waiting. Clients are still encouraged to speak to receptionists about needs and emergencies (post-coital contraception / need to start pills or patches imminently etc.) Emergency patients are never turned away from walk-in clinics.

The service does not record data on how patients access the service but in 2007/08 it estimates that 75% of patients self-referred, 20% were GP referrals for IUD, implants or complex contraception and 5% were referrals from secondary care / social services.

The service is advertised in service leaflets, on Ealing PCT website, on the FPA website, by NHS Direct and in the local hospitals A & E and gynaecology departments.

Activity

In 2007/08 there were 19,251 attendances at the service. Of these 11,258 were first attendances with 29% of these being under 25 years of age.

In 2007/08 approximately 75% of attendances were Ealing PCT residents. Of the remaining 25%, the majority were from Hounslow PCT (as there is no service in Chiswick and few IUD facilities in Hounslow) and Hillingdon PCT.

In 2008/09 there is concern that anticipated service changes in Brent PCT and Harrow PCT will also potentially increase ‘cross border’ flow and pressure on the service.

Premises

The service operates from a number of premises which at times constrain service delivery. Main concerns include issues of privacy at reception areas and the availability of clinical rooms to allow clinics to run efficiently.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment
- Simple partner notification
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
• Health promotion
• Hormonal contraception / Depo-Provera
• Cervical screening and referral
• Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive outreach provided weekly at the local Drugs & Alcohol Unit. Plus ad hoc work with MIND targeting people with learning disabilities and involvement in Fresher’s’ Fairs, College Health Days and Looked After Children Events.
• 2 dedicated Young Persons clinics weekly
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal

In 2008/09 the service will establish the Intermediate Care Gynaecology Service in Southall with access from walk-in sexual health clinics and participate in the local LES for ring pessaries

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>20%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>15%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 80% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the North West London Sexual Health Network. The network is provider led with Dr Gary Brook being Clinical Lead and Melanie Britton being Network Manager. There is commissioning involvement in the network.

Education and Training

The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) Intra Uterine Techniques
• Letter of Competence (LoC) subdermal implants
• Seminars at Ealing Hospital
• Updates for local GPs
The service receives £300 from trainees for DFSRH and £150 for LoCs. Reciprocal arrangements with no charge are in place with the GU department at Ealing Hospital.

The service provides the following nursing training:

- Practical training for family planning course run at Thames Valley University (for 6-8 trainees per annum)
- Practical training for own staff undertaking RCN on-line sexual health module
- Training for IUD and implant fitting for own staff and practice nurses recommended to the service

The service also provides training for:

- Pharmacists to use the emergency hormonal contraception PGD
- Pharmacists for chlamydia screening and treatment

Service changes

In June 2009 the service will open a new central site with its own dedicated premises. Two further sites will come on line in 2009 enabling the service to move out of poor accommodation.

In 2008/09 the service will receive increased funding (yet to be specified) for:

- Appointment of a part-time Business Manager to improve access to LARCs and support clinicians
- Improvement to the young peoples service following the local strategic review (in conjunction with the LA)
- NCSP to be fully funded, including outreach sexual health work
- Open sessions every morning on the site closest to the new ‘hub’
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Enfield PCT Reproductive & Sexual Health Service is part of Enfield Primary Care Trust. The service is consultant led and is funded via Enfield PCT on a block contract for everything except gynaecology services, which are funded separately, but not at full PbR rate.

Access

The service has its doors open for 44 hours per week delivered in a variety of settings. Of the 44 hours, 18.5 are after 7 pm at night and / or at the weekend.

The service offers mixed access with appointment clinics used for procedures. The service sometimes caps numbers at walk-in clinics to allow the clinic to finish on time. Emergency patients will be seen outside of clinic time if a member of staff is available otherwise they will be directed to A & E.

In 2007/08 it is estimated that 75% of patients self-referred, 10% were referrals from primary care, 5% referrals from secondary care and 10% referrals from voluntary / third sector organisations.

The service is advertised in service leaflets, posters and yellow pages, on Enfield PCT website, on the FPA website, on the 4YP website and on the R U Thinking website.

Activity

In 2007/08 there were 10,092 attendances at the service. Of these 6,031 were first attendances. The service does not have data on what % of these were under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown.

Premises

The main premises do not afford privacy in the reception area.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Counselling and referral for vasectomy

Level 3
Specialist level responsibility for provider quality, teaching and training and clinical governance
Contraceptive outreach provides a number of sessions each week from four different sites
Integrated Young People’s clinics
Highly specialised contraception
Difficult IUD insertion and removal
Psychosexual / erectile dysfunction service

The service also provides a gynaecology clinic.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>10%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>60%</td>
<td>50%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>30%</td>
<td>10%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP, the service does not provide treatment.

Clinical network

The service is a member of the embryonic North Central London Sexual Health Network. The network does not have a Clinical Lead or a Network Manager.

Education and Training

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Letter of Competence (LoC) in Intra Uterine Techniques
- Letter of Competence (LoC) in subdermal implants
- Career Grade training
- SpR training
- Undergraduate sessions

The service receives £500 from trainees for DFSRH, £300 for the LoC IUT, £150 for the LoC SdI and £140 per undergraduate session per student.

The service provides the following nursing training:

- Practical training for the post registration Family /Planning course but receives no funding for this

The service also provides training for:

- Ad hoc training for local GPs but receives no funding for this

Service changes
The service capacity is constrained by its funding, discussions are taking place with GP commissioners regarding LARC and Young Peoples services. In addition the service is seeking funding to provide more training and updating for General Practice.

In 2008/09 the service will receive increased funding (yet to be specified) for:

- A Clinic in a Box Level 1 service
- An outreach nurse delivering Level 2 services.
- Gynaecology service
- New IT system
Greenwich PCT
Contraceptive & Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Greenwich PCT Contraceptive & Sexual Health Service is part of Greenwich Primary Care Trust. The service is Associate Specialist led and is funded via Greenwich PCT on a block contract. Service level agreements are currently being devised.

Access

The service has its doors open for 30 hours per week. Of the 30 hours, 5 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 87% of services being walk-in and 13% appointment clinics. Patient numbers at walk-in clinics are capped based on the skill mix of health professionals. The service has to turn patients away at approximately half of all walk-in clinics. Data on patients turned away was collected for one month (March 08) when 70 clients were turned away. The decision to close a session is based on staffing levels and triage of waiting clients. Emergency patients are never turned away from walk-in clinics.

In 2007/08 it is estimated that 80% of patients self-referred, 15% were referrals from primary care and 5% were referrals from secondary care.

The service is advertised in service leaflets, on the Greenwich PCT website, on the FPA website and via the FPA Helpline.

Activity

In 2007/08 there were 15,212 attendances at the service. Of these 9,273 were first attendances with 47.9% of these being under 25 years of age.

The DNA rate for new appointments and follow-up appointments is not known.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bexley</td>
<td>10%</td>
</tr>
<tr>
<td>Bromley</td>
<td>3%</td>
</tr>
<tr>
<td>Greenwich</td>
<td>85%</td>
</tr>
<tr>
<td>Lewisham</td>
<td>2%</td>
</tr>
</tbody>
</table>

Premises

The service operates from clinical premises that are fit for purpose.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment
- Simple partner notification
- HIV testing including pre test discussion and giving results
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening for Hepatitis B
- Chlamydia screening as part of the NCSP

**Level 2**
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Symptomatic STI testing and treatment (men & women)
- Counselling and referral for vasectomy

**Level 3**
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach
- Contraceptive outreach provided at a teenage pregnancy project, two over-16 years education colleges, with ‘teentalk’ at a school-based health centre and on a 1:1 basis with specific Looked After Children
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult implant removal
- Psychosexual / erectile dysfunction services

The service also provides ultrasound scanning for pregnancy dating, impalpable implants and lost IUDs.

**Staff**

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Medical Staff</th>
<th>Nursing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>87.5%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>12.5%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Medical Staff</th>
<th>Nursing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>50%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 80% of staff trained (as either prescriber or PGD) in providing treatment as part of the NCSP.

**Clinical network**

The service is a member of the South East London Sexual Health Network. The network is provider led with Dr Michael Brady being Clinical Lead.

**Education and Training**

The service provides the following medical training:
• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) Intra Uterine Techniques
• Letter of Competence (LoC) subdermal implants

The service receives £500 from trainees for DFSRH and usually do LoC SDI at the same time. LoC IUD training charge is dependant upon number of sessions and previous experience.

The service provides the following nursing training:

• Practical training for the family planning course
• Training for IUD and Implant fitting

The service receives no funding for nurse training.

The service also provides training for:

• Pharmacists in Greenwich and Bexley PCTs
• Training for doctors and nurses in Bexley PCT

Funding arrangements for this training are on an ad hoc basis

Service changes

In 2008/09 the service will be providing STI testing and treatment and screening and treatment as part of the NCSP with no additional funds.

The service is constrained by its limited number of clinical staff and a lack of funding for bank staff.
Hammersmith & Fulham PCT
Contraceptive & Reproductive Health Service
(provided by Westside Contraceptive Services)

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Westside Contraceptive service is part of Westminster PCT. The service is consultant led and is funded via Westminster, Hammersmith & Fulham and Kensington & Chelsea PCTs with Hammersmith & Fulham PCT being the lead commissioner. The service is funded on block contracts with each of the PCTs. From January 2008 Westside Contraceptive Services are running the Chlamydia Screening Office for all three PCTs.

Access

The service has its doors open for 38.5 hours per week delivered in a variety of settings. Of the 38.5 hours, 4.25 are after 7 pm at night and / or at the weekend.

The service offers mixed access with the majority of sessions being appointment clinics that also accept walk-in patients up to the capacity of the session. If service capacity is reached clients walking in are triaged to alternative sessions unless they are an emergency in which case they will be seen. Senior clinicians are always available at the hub for consultation on urgent medical issues. Data is not collected on the numbers of patients turned away.

In 2007/08 the service estimate that 83% of patients self-referred, 10% were referrals from primary care, 5% were referrals from secondary care and 2% were referrals from the voluntary / third sector.

The service is advertised in service leaflets, the yellow pages, Hammersmith & Fulham PCT website and on the FPA website.

Activity

In 2007/08 there were 12,403 attendances at the service. Of these 8,102 were first attendances with 24% of these being under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known, data was not collected.

In 2007/08 data on % attendance by PCT of residence was not collected.

Premises

The service considers that its premises are not ‘fit for purpose’ as some sites have problems with reception facilities and IT, space and privacy, equipment and storage.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2

283
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive outreach
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Psychosexual / erectile dysfunction services

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>40%</td>
<td>20%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>70%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is not a member of a clinical network.

Education and Training

The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) Intra Uterine Techniques
• Letter of Competence (LoC) subdermal implants
• Refresher sessions for GPs
• Undergraduate sessions for medical students at Imperial.

The service receives £300 from trainees for DFSRH.

The service provides the following nursing training:

• Clinical training for the Contraception course at Thames Valley University

The service receives £300 per candidate.

The service provides other training for:

• Walk-in Centre staff
• Community pharmacists
• Youth services / teenage pregnancy staff

The service receives no specific funding for this.

The service also provides clinical governance for Walk-in Centre nurses and pharmacists for both emergency hormonal contraception and the NCSP.

Service changes

There are plans for increasing funding except in relation to management of chlamydia screening office (from January 2008).

In 2008/09 the service is reorganising its structure, skill mix and opening times across all 3 commissioning PCTs.

The service identified the following constraints /gaps:
• Progress on establishment of a tariff for contraceptive care
• IT the current system is inadequate and NPfIT offers no ready solution
• The national focus on reproductive health for those under 25 is welcome however the needs of over 25 year olds remain largely unexamined
Haringey PCT
Sexual Health, Contraception & Reproductive Care Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Haringey PCT Sexual Health, Contraception & Reproductive Service is part of Haringey Primary Care Trust. The service is consultant led and is funded via Haringey PCT on a block contract.

Access

The service has its doors open for 52 hours per week delivered in a variety of settings. Of the 52 hours, 25 are after 7 pm at night and / or at the weekend.

The service offers a walk-in service except for 1 psychosexual session weekly which is a booked appointment clinic. Walk-in clinic numbers are capped and calculated on the number of clinician hours available at each session. The service has to turn away a small number of non-emergency patients occasionally. Patients are triaged to assess need. Data is collected on patients turned away; in 2007/08 this affected less than 100 patients.

In 2007/08 the service estimates that 90% of patients self-referred, 5% were referred from primary care and 5% were referred from secondary care.

The service is advertised in service leaflets, via the Haringey PCT website, via various sexual health websites and via posters in GP surgeries.

Activity

In 2007/08 there were 13,179 attendances at the service. Of these 7,631 were first attendances with 31% of these being under 25 years of age.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barnet</td>
<td>2%</td>
</tr>
<tr>
<td>Camden</td>
<td>1%</td>
</tr>
<tr>
<td>City &amp; Hackney</td>
<td>2%</td>
</tr>
<tr>
<td>Enfield</td>
<td>11%</td>
</tr>
<tr>
<td>Haringey</td>
<td>84%</td>
</tr>
</tbody>
</table>

Premises

The service operates from central premises that are not ‘fit for purpose’ and from a number of satellite sites across the borough. St Ann’s sexual Health centre does not have enough clinical space and access for patients is not particularly easy.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women)
- Simple partner notification
- HIV testing
- Pregnancy testing and counselling
• Referral for abortion
• Provision of emergency hormonal contraception
• Contraceptive information
• Health promotion
• Condom distribution
• Health promotion
• Hormonal contraception / Depo-Provera
• Cervical screening and referral
• Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive outreach provided: ‘4 YP’ mobile bus that gives information plus condoms. Also two weekly ‘4YP’ clinics providing integrated sexual health and contraception.
• Specialist services
• Highly specialised contraception
• Difficult IUD insertion and removal
• Psychosexual / erectile dysfunction services

The service also provides teaching on natural family planning, a domiciliary service and has a Care Pathway in place with the local GUM service for HIV positive women requiring contraception.

Staff

All staff has contracts solely with the service with the exception of a Career Grade doctor who is shared with Enfield PCT.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>25%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>25%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>20%</td>
<td>20%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 95% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of a member of the newly formed North Central London Clinical Network.

Education and Training

The service provides the following medical training:
• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) in Intra Uterine Techniques
• Letter of Competence (LoC) in subdermal implants

The service receives a fee for the above.

The service provides the following nursing training:

• Practical training for family planning course

The service receives no funding for the above.

The service provides support and clinical governance for the locally enhanced service offered by GPs in Haringey.

**Service changes**

The department is moving towards greater integration between Family Planning and Sexual Health with joint appointments and the development of dual trained staff.

In **2008/09** the service will:

• Develop Level 2 Integrated sexual health clinics (STI testing and treatment and contraception services) located in community centres.
• Mainstream 4YP service into clinical and non-clinical services across Haringey. This service will be run jointly with the local authority.
• Develop EPR.

Service constraints / gaps:

• A purpose built facility for a Level 3 integrated service is being considered
• Family planning is being computerised in 2008/09
Harrow PCT
Contraceptive & Reproductive Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Harrow PCT Contraceptive & Reproductive Health Service is part of Northwick Park Hospital. The service is consultant led and is funded via Harrow PCT on a block contract. In 2008/09 the service has had a 30% reduction in its budget compared to 2007/08 as part of the unravelling of the block contract. Negotiations and discussions are under way with the commissioning trust on the SLA for 2009.

Access

The service has its doors open for 50 hours per week delivered in a variety of settings. Of the 50 hours, 4 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 65% of services being walk-in and 35% appointment clinics. The service has to close to patients (turn patients away) at least once a week on an evening clinic. Patients are triaged and emergency patients are never turned away.

In 2007/08 the service estimate that 80% of patients self-referred, 10% were referrals from primary care, 3% were referrals from secondary care, 3% were referrals from the voluntary / third sector and 4% were referrals from pharmacists, NHS Direct, the FPA or neighbouring contraceptive services.

The service is advertised in service leaflets, on the Northwick Park Hospital website and via FPA, NHS Direct, GUM department at Northwick Park Hospital, O&G department at Northwick Park Hospital and outreach services.

Activity

In 2007/08 there were 17,142 attendances at the service. Of these 7,043 were first attendances with 53% of these being under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence was not collected but it is estimated that 85% of attendances were Harrow PCT residents.

Premises

The service operates from premises that are largely shared with inadequate clinical and non-clinical accommodation.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP
Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Counselling and referral for vasectomy

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Contraceptive outreach: Clinic in a Box services to 4 schools and 3 colleges weekly during term time, weekly to Pinner Youth Club (discontinued Oct 07), weekly to Connexions, weekly to the drug & alcohol service, alternate weeks with the youth offending team and pupil referral unit and on an ad hoc basis with Young Parents, Looked After Children, the Leaving Care Service and young unaccompanied asylum seekers.
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult implant removal
- Psychosexual / erectile dysfunction services

The service also provides a pre pregnancy advice service and teaching on barrier methods and fertility awareness.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>30%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>50%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100% of staff trained in providing treatment as part of the NCSP.

Clinical Network

The service is a member of the London Lead Clinicians Network.

Education and Training

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Letter of Competence (LoC) in Intra Uterine Techniques
- Letter of Competence (LoC) in subdermal implants
- Undergraduate sessions for students doing Obstetrics & Gynaecology

The service receives £250-450 from trainees for DFSRH and £390 for LoCIUT and £250 for LoCSDI training.

The service provides the following nursing training:

- Independent prescribing / PGDs
• Updates for nurses working in local services

PCTs are charged for staff not working in Harrow

The service also provides training as per the local sexual health strategy and teenage pregnancy strategy to:

• Teachers, social workers, youth workers, voluntary sector and other health care staff

A nominal fee is paid by Harrow PCT and the local Teenage Pregnancy Unit for the above training.

Service changes

Funding of the service is the main constraint and yet to be resolved with Commissioners.

In 2008/09 the service will new funding for:

• A Clinic in a Box service, commissioned by Harrow Connexions. Investment over 3 years.
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Havering PCT contraception & Reproductive Health Service is part of Havering PCT. The service is neither Consultant nor Associate Specialist led due to an unfilled consultant post. The service is funded via Havering and Barking & Dagenham PCTs on a block contracts. Services are delivered across both PCTs. In 2008/09 services will transfer to Barking & Havering Hospitals NHS Trust as part of an integrated sexual health service that was commissioned via a tendering exercise.

Access

The service has its doors open for 25.5 hours per week in Havering and 25 hours per week in Barking & Dagenham. Of these hours, 9.5 in Havering and 5.5 in Barking & Dagenham are after 7 pm at night and / or at the weekend.

The service offers mixed access with 30% being walk-in and 70% being appointment clinics in Havering and 33% being walk-in and 67% being appointment clinics in Barking & Dagenham. Walk-in Clinic numbers are capped depending on staffing levels but emergency patients are always seen. Clinics in Havering are closed on average once a week due to pressures of numbers attending. Clinics in Barking & Dagenham rarely have to close. Data is collected on patients turned away.

In 2007/08 it is estimated that 98% of patients self-referred, 1% were referrals from primary care, less than 1% were referrals from secondary care and less than 1% were referrals from the voluntary / third sector.

The service is advertised in service leaflets, community clinics, on local and national websites and via the youth service.

Activity

In 2007/08 there were 16,545 attendances at the service (Havering - 9881, Barking & Dagenham 5912, Brentwood 752). Of these, 9969 were first attendances (Havering – 5933, Barking & Dagenham 3614, Brentwood 422). Data for the number of appointments for those under 25 years of age was not available.

DNA rates for all appointments were 18% for Havering, 27% for Barking & Dagenham and 14% for Brentwood. Data was not collected for the DNA rates for new or follow-up appointments.

In 2007/08 % attendance by PCT of residence is unknown.

Premises

The main premises are considered ‘fit for purpose’. However some of the premises used to run peripheral clinics do not have rooms equipped for examination or disabled access.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
• Chlamydia screening as part of the NCSP (in Barking & Dagenham only)

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive outreach provided: for young people, 1 lunchtime session at a local FE college, 5 sessions provided in association with the youth service in Young People’s Information Shops
• Dedicated walk-in services for under 25s
• Highly specialised contraception
• Difficult IUD insertion and removal

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>20%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP in Barking & Dagenham PCT, treatment is not provided as part of the NCSP.

Clinical network

The service is not a member of a clinical network.

Education and Training

The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)

Places are limited and trainees pay per clinical session.

The service provides the following nursing training:

• Practical training for the family planning / reproductive health course
• Cervical cytology training
• Observation sessions for pre-registration nursing and midwifery students

The service receives no payment for these.

The service also provides:

• Workshops for youth service, education, social services, schools, training centres
• Update days for practice nurses
• Input into the South Bank University Family Planning Course

The service receives no payment for these.

Service changes

From August 2008 the service will be delivered by Barking, Havering and Redbridge Hospitals Trust. It will be a consultant led reproductive and sexual health service.

Service gaps and constraints have included:
• Vacant consultant post
• Too few doctors
• No IT system in place so everything is paper-based
• Chlamydia screening not being available through the service in Havering
Hillingdon PCT
Family Planning & Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Hilingdon PCT Family Planning & Sexual Health Service is part of Hilingdon Primary Care Trust. The service is associate specialist led is funded via Hilingdon PCT on a block contract. Service level agreements relating to activity are in place.

Access

The service has its doors open for 88 hours per week delivered in a variety of settings. Of the 88 hours, 39 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 60% of services being walk-in and 40% appointment clinics. The service sometimes has to close to patients (turn patients away). Patients are triaged and always seen at the next available session.

In 2007/08 the service estimates that 79% of patients self-referred, 10% were referred from primary care, 5% were referred from secondary care, and 5% were referred from the voluntary / third sector and 1% from social services.

The service is advertised in service leaflets and posters, via NHS Direct and via the Hilingdon PCT website.

Activity

In 2007/08 there were 13,186 attendances at the service. Of these 6,715 were first attendances with 10% of these being under 25 years of age.

The DNA rate for new appointments in 2007/08 was 25% and for follow-up appointments was 30%.

In 2007/08 it is estimated that 70% of attendances were from Hilingdon PCT residents.

Premises

The service operates from central premises that are ‘fit for purpose’ and from a number of satellite sites across the borough.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Simple Partner Notification
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
Level 3

- Contraceptive outreach provided weekly to a Community Centre, 6th Form College and a Youth Centre. Clinics provide contraception and chlamydia screening and treatment.
- Specialist services for young people
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult Implant removal
- Psychosexual / erectile dysfunction services

Staff

All staff has contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>80%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100 % of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the North West London Clinical Network. The network is provider led with Dr Gary Brook being Clinical Lead and Melanie Britton being Network Manager. There is commissioning involvement in the network.

Education and Training

The service provides no medical training.

The service provides the following nursing training:

- Practical training for family planning course

The service receives £300 per trainee for placements.

The service also provides:

- PGD training
- Training in contraceptive Implant fitting
- Clinical updates

Service changes

In 2008/09 the service will receive increased funding for:

- Outreach clinics.

The service will be training more of its staff in Implanon insertion in 2008/09.
Hounslow PCT
Family Planning Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Hounslow PCT Family Planning Service is part of Hounslow PCT. The service is not consultant or associate specialist led; clinical leadership is provided by the Clinical Services Manager. The service is funded via Hounslow PCT and the London Borough of Hounslow on a block contract. The Family Planning Service also hosts the Chlamydia Screening Programme, to which an agreed budget is delegated.

Access

The service has its doors open for 54 hours per week. Of the 54 hours, 8.5 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 84% being walk-in and 16% being appointment clinics. Patient numbers are not capped and the service collects data on the number of patients turned away (this only occurs if they have attended an inappropriate session for the fitting of LARCs). Emergency patients are always seen.

In 2007/08 it is estimated that 70% of patients self-referred, 20% were referrals from primary care and 10% were referrals from secondary care.

The service is advertised in service leaflets and posters distributed and displayed in a variety of places, via the Hounslow PCT website and via NHS Direct.

Activity

In 2007/08 there were 21,764 attendances at the service. Of these 4,094 were first attendances, and of these 38% were under 25 years of age.

DNA rates for new appointments were 30% and for follow-up appointments were 10%.

In 2007/08 % attendance by PCT of residence is unknown but it is estimated that 90% of attendances were Hounslow PCT residents.

Premises

The main premises are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Simple partner notification
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
• Symptomatic STI testing & treatment

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraception outreach: for young people which comprises chlamydia screening and c card scheme at 2 colleges and a youth club, sexual health advice sessions at 2 schools weekly
• Specialist services for ‘at risk’ groups including young people
• Coordination of partner notification (NCSP)
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal

The service hosts the Hounslow chlamydia screening programme.

Staff

All staff have contracts solely with the service. However as part of a modernisation initiative from 2008/09 sexual health clinicians will work across the family planning and other services.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>50%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>75%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>25%</td>
<td>10%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>25%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>25%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 40% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the London Lead Clinicians Group.

Education and Training

The service provides the following medical training:

• Letter of Competence (LoC) in Intra Uterine Techniques
• Letter of Competence (LoC) in subdermal implants
• Undergraduate observation sessions for medical students
• Refresher sessions for GPs fitting LARCs

The service receives £200 from trainees for LoC training.

The service provides the following nursing training:

• Clinical placements for the family planning course
• Updates for practice nurses
• Training for health visitors and community public health nurses

The service receives no funding for any of the above training.
The service also provides training for:

- Staff across the PCT
- Speakeasy course for carers
- Chlamydia screening training for the PCT

The service is negotiating with the PCT in 2008/09 regarding funding for the above training. Chlamydia screening training is funded.

The Clinical Services Manager is associate chair for a group that provides clinical advice to GPs offering enhanced services in sexual health.

Service changes

In 2008/09 the service is part of a PCT modernisation initiative focussing on sexual health which will address service gaps / constraints.
Kensington & Chelsea PCT
Contraceptive & Reproductive Health Service
(provided by Westside Contraceptive Services)

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Westside Contraceptive service is part of Westminster PCT. The service is consultant led and is funded via Westminster, Hammersmith & Fulham and Kensington & Chelsea PCTs with Hammersmith & Fulham PCT being the lead commissioner. The service is funded on block contracts with each of the PCTs. From January 2008 Westside Contraceptive Services are running the Chlamydia Screening Office for all three PCTs.

Access

The service has its doors open for 49.25 hours per week delivered in a variety of settings. Of the 49.25 hours, 6.5 are after 7 pm at night and / or at the weekend.

The service offers mixed access with the majority of sessions being appointment clinics that also accept walk-in patients up to the capacity of the session. If service capacity is reached clients walking in are triaged to alternative sessions unless they are an emergency in which case they will be seen. Senior clinicians are always available at the hub for consultation on urgent medical issues. Data is not collected on the numbers of patients turned away.

In 2007/08 the service estimate that 83% of patients self-referred, 10% were referrals from primary care, 5% were referrals from secondary care and 2% were referrals from the voluntary / third sector.

The service is advertised in service leaflets, the yellow pages, Hammersmith & Fulham PCT website and on the FPA website.

Activity

In 2007/08 there were 20,898 attendances at the service. Of these 12,411 were first attendances with 22% of these being under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known, data was not collected.

In 2007/08 data on % attendance by PCT of residence was not collected.

Premises

The service considers that its premises are not ‘fit for purpose’ as some sites have problems with reception facilities and IT, space and privacy, equipment and storage.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Counselling and referral for vasectomy

**Level 3**
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Contraceptive outreach
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult implant removal

**Staff**

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>40%</td>
<td>20%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>70%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100% of staff trained in providing treatment as part of the NCSP.

**Clinical network**

The service is not a member of a clinical network.

**Education and Training**

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Letter of Competence (LoC) Intra Uterine Techniques
- Letter of Competence (LoC) subdermal implants
- Refresher sessions for GPs
- Undergraduate sessions for medical students at Imperial.

The service receives £300 from trainees for DFSRH.

The service provides the following nursing training:

- Clinical training for the Contraception course at Thames Valley University

The service receives £300 per candidate.

The service provides other training for:

- Walk-in centre staff
- Community pharmacists
The service receives no specific funding for this.

The service also provides clinical governance for walk-in centre nurses and pharmacists for both emergency hormonal contraception and the NCSP.

Service changes

There are no plans for increasing funding except in relation to management of the Chlamydia Screening Office (from January 08).

In 2008/09 the service is re-organising its structure, skill mix and opening times across all 3 commissioning PCTs.

The service identified the following constraints /gaps:
- Progress on establishment of a tariff for contraceptive care
- IT the current system is inadequate and NPfIT offers no ready solution
- The national focus on reproductive health for those under 25 is welcome however the needs of over 25 year olds remain largely unexamined
Kingston PCT
Family Planning Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Kingston PCT Family Planning Service is part of Kingston Primary Care Trust. The service is not Consultant or Associate Specialist led and is funded via Kingston PCT on a block contract. Service level agreements relating to activity are in place.

Access

The service (including KU19) has its doors open for 12.5 hours per week. Of the 12.5 hours, 3 are after 7 pm at night and/or at the weekend.

The service offers mixed access with 95% being walk-in services and 5% being appointment clinics (mainly for Implanon and IUD/IUS insertions). Walk-in clinic numbers are capped but if a service user requires extra input then there is flexibility in the service delivery.

In 2007/08 the service was unable to provide a % breakdown on how patients accessed the service.

The service is advertised via the Kingston PCT website.

Activity

In 2007/08 there were 2,398 attendances at the service. Of these 873 were first attendances with 69% of these being under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence was not collected.

Premises

The service operates from premises that are ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Counselling and referral for vasectomy

Level 3
- Specialist Young Peoples Clinics - KU19
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult Implant removal

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

80% of staff is trained in chlamydia screening as part of the NCSP, the service does not provide treatment as part of the NCSP.

Clinical network

The service is a member of a SWAGNET.

Education and Training

The service provides no medical training.

The service provides the following nursing training:

• Practical training for family planning course for which they receive no payment

Service changes

In 2008/09 there are no anticipated service changes.
Lambeth PCT
Reproductive & Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Lambeth PCT Reproductive & Sexual Health Service is part of Lambeth PCT. The service is consultant led and is funded by Lambeth PCT on a block contract.

Access

The service has its doors open for 52 hours per week. Of the 52 hours, 9 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 75% being walk-in and 25% being appointment clinics. The service does not cap numbers at walk-in clinics but does regularly close to patients (turn patients away). On average it is estimated that this occurs at 15% of walk-in clinics. Data is not collected on the number of patients turned away.

In 2007/08 it is estimated that 63% of patients self-referred, 25% were referrals from primary care, 2% referrals from secondary care and 10% referrals from the voluntary / third sector.

The service is advertised in service leaflets, relevant websites and via NHS Direct.

Activity

In 2007/08 there were 23,945 attendances at the service. Of these 14,218 were first attendances, with 25% of these being under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known, data was not collected.

In 2007/08 % attendance by PCT of residence is unknown.

Premises

The main premises are considered not ‘fit for purpose’. However, a new centre is due to open in Autumn 2008.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women)
- Simple partner notification
- HIV testing (including pre test discussion and giving results)
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B (the service is screening only)
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Symptomatic STI testing and treatment (men and women)
- Counselling and referral for vasectomy

Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach
- Contraception outreach: 2 full time outreach nurses employed to work in schools and clubs. And a small domiciliary service
- Specialist services for ‘at risk’ groups
- Specialist infections management
- Coordination of partner notification
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult implant removal
- Psychosexual / erectile dysfunction services

The service also provides ultrasound scanning where clinically indicated and specialist services for menopause and pre menstrual syndrome.

Staff

All staff have contracts solely with the service, with the exception of three sessional GUM nurses whose main job is at Guys & St Thomas’ NHS Foundation Trust.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>90%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>20%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>5%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>30%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>60%</td>
<td>10%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 80% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the South East London Sexual Health Network. The network Lead is Dr Michael Brady. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Letter of Competence (LoC) in Intra Uterine Techniques
- Letter of Competence (LoC) in subdermal implants
- Letter of Competence (LoC) Medical Education
- Undergraduate theory for year 4 medical students at GKT medical school
- FSRH SSM in Menopause care
The service receives SIFT funding which varies depending on activity.

The service provides the following nursing training:

- Practical training for the post-registration family planning course
- Practical placements
- PGD training

The service receives no funding for these.

The service also provides:

- A GP masterclass
- Updates for GPs and practice nurses
- Training for pharmacists
- Training for school nurses

For which it receives no funding.

Service changes

In 2008/09 the service will receive increased funding for:

- The opening of a new dedicated hub.
- The opening of a walk-in service targeting men and young people.
- Appointment of a young people’s outreach nurse.
Lambeth PCT
Kings College Hospital Reproductive & Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Kings College Hospital Reproductive & Sexual Health Service is part of Kings College Hospital NHS Foundation Trust. The service is consultant led and is funded via Lambeth and Southwark PCT with Lambeth PCT being the lead Commissioner on a block contract.

Access

The service has its doors open for 66 hours per week. Of the 66 hours, 6 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 68% being walk-in and 32% being appointment clinics. The service sometimes closes to patients (turns patients away). On average this occurs three times a week at walk-in clinics. Patients are triaged and emergency patients will be seen. The decision to temporarily close the clinic is only made if demand exceeds the staff numbers available.

In 2007/08 it is estimated that 85% of patients self-referred, 10% were referrals from primary care, 5% referrals from secondary care.

The service is advertised in service leaflets, on the Kings College Hospital website and by NHS Direct.

Activity

In 2007/08 there were 24,108 attendances at the service. Of these 15,444 were first attendances with 41.5% of these being under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown.

Premises

The service is delivered from three sites. Some aspects of the main premises are not considered ‘fit for purpose’. For example, disabled access to offices and the staff facilities are poor.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women)
- Simple partner notification
- HIV testing (including pre test discussion and giving results)
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B (the service is screening only)
- Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Symptomatic STI testing and treatment (men and women)
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Young People’s clinic
• Coordination of partner notification
• Highly specialised contraception
• Difficult Implanon removal
• Difficult IUD insertion and removal

The service also provides ultrasound scanning where clinically indicated.

Staff

All staff have contracts solely with the service, with the exception of two Associate specialists who are jointly appointed with the abortion service.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>50%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>15%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>33%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the South East London Sexual Health Network. The network Lead is Dr Michael Brady. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) in Intra Uterine Techniques
• Letter of Competence (LoC) in subdermal implants
• Letter of Competence (LoC) Medical Education
• Career Grade training
• Training of VTS GPs SHOs in Community Gynaeology & Reproductive & Sexual Health
• Undergraduate teaching for year 4 medical students at GKT medical school

The service receives £300 from trainees for DFSRH (practical training).

The service provides the following nursing training:
• Student nurses from Nightingale School of Nursing given practical training for the post-registration family planning course

The service also provides training for:

• Study days for primary care
• On an ad hoc basis for local GPs but receives no funding for this

Formal arrangements are in place for the lead consultant to provide on call cover for pharmacists on a shared rota with two other PCT consultants.

Service changes

There are plans for the integration of the GUM / HIV department with Reproductive & Sexual Health at Camberwell Sexual Health Centre. Services that are appointment based would be provided from the existing GUM clinic at the Caldecot Centre.

In 2008/09 the service will receive increased funding for:

• Continuous opening on weekdays from 9.30am to 7.30pm

Service gaps include:

• Funding
• A sub-specialty training post in Sexual & Reproductive Health
• Funding for training primary care to fit LARCs
• Capital investment to make the premises fit for purpose
• A medical Gynaecology & outpatient vasectomy service as part of the Level 3 service
• Cervical cytology services, particularly to increase out of hours access
• Investment in IT to develop electronic patient records that are identical in all sexual health services, and for uniform data collection which will inform KT31 & KC 60 coding. Currently none of the STI related activity from RSH service is included in KC60 data
The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Lewisham PCT Reproductive & Sexual Health Service is part of Lewisham Primary Care Trust. The service is consultant led and is funded via Lewisham PCT on a block contract. In 2008/09 the service will be remunerated under PbR for the STI services it provides.

Access

The service has its doors open for 146 hours per week delivered from four centres. Of the 146 hours, 19 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 95% of services being walk-in and 5% appointment clinics. The service does not cap numbers but has to close to patients (turn patients away) at approximately one session per month. The decision to close a session is taken by the most senior clinician present in conjunction with the consultant or manager on call. Emergency patients are never turned away from walk-in clinics.

In 2007/08 the service estimate that 95% of patients self-referred, 3% were GP referrals from primary care and 2% were referrals from secondary care.

The service is advertised in service leaflets, on its own website, on the Lewisham PCT website, by the FPA, by NHS Direct and by local GPs and pharmacists.

Activity

In 2007/08 there were 52,614 attendances at the service. Of these 25,950 were first attendances with 51% of these being under 25 years of age.

In 2007/08 % attendance by PCT of residence was not collected but it is estimated that approximately 94% of attendances were Lewisham PCT residents.

Premises

The service operates from a number of premises which are ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment
- Simple partner notification
- HIV testing (including pre test discussion and giving results)
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Symptomatic STI testing and treatment (men and women)
• Counselling and referral for vasectomy

**Level 3**

• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive outreach: Clinic in a Box provided at Connexions, ad hoc outreach work with teenage mothers and post ToP teenagers. SRE is provided in 12 Lewisham schools, 5 colleges and 6th Forms and in the Pupil Referral Unit.
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Psychosexual / erectile dysfunction services

The service also provides natural family planning teaching and support, counselling and referral for female sterilisation, domiciliary services and a community gynaecology service.

In 2008/09 the service will establish the Intermediate Care Gynaecology Service in Southall with access from walk-in sexual health clinics and participate in the local LES for ring pessaries

**Staff**

All staff have contracts solely with the service, except one doctor who is employed on a sessional basis but is substantively employed as an HIV Consultant at Lewisham Hospital.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>95%</td>
<td>10%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>95%</td>
<td>3%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>75%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>4%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 83% of staff trained in providing treatment as part of the NCSP.

**Clinical network**

The service is a member of the South East London Sexual Health Network. The network is provider led with Dr Michael Brady being Clinical Lead. The service is also a member of the South East London Reproductive Health Network and the London Lead Clinicians Group.

**Education and Training**

The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) Intra Uterine Training
• Letter of Competence (LoC) subdermal implants
• Letter of Competence (LoC) medical Education
• Career Grade training
• Training of VTS GPs via 4 month attachments
• Undergraduate theory and sessions for GKT medical school
• DFSRH theory in conjunction with Lambeth and Southwark
- DFSRH practical independently (post graduate medical)
- Training of VTS GPs by 4 month attachments
- Letters of competence in IUDs, implants
- medical education (post graduate specialist)
- Career grade training (post graduate medical for specialists)
- Supervision of MFSRH work (post graduate specialist)

The service receives £400 from trainees for DFSRH and received a block grant to fund training for LoCs. From 2008/09 the service will charge for LoC training. It receives £500 three times a year for full time VTS trainees from the London Deanery and SIFT reimbursement for medical students from GKT.

The service provides the following nursing training:

- Practical training for family planning course
- In-house practical training for own staff to use PGDs, become Independent prescribers, fit implants and undertake STI work

This work is not funded but the service receives credits from Kings College for training own staff.

The service also provides training for:

- Pharmacists to use the emergency hormonal contraception PGD
- Pharmacists for chlamydia screening and treatment

The service provides supervision for the service lead in Greenwich PCT for which there are local arrangements and to a service in North Suffolk for which cross charging is in place.

Service changes

In June 2009 the service will open a new central site with its own dedicated premises. Two further sites will come on line in 2009 enabling the service to move out of poor accommodation.

In 2008/09 the service will receive increased funding (yet to be specified) for:

- EMIS System to enable paper free working.
- Funding to improve young people’s access to contraception. This is likely to be spent on condom vending machines, reception improvements and training for GPs.

In addition in 2008/09 the service plans to expand rapid HIV testing and increase Saturday provision without receiving new / increased funding.

Service gaps include:

- A local abortion service, the current provision is outside Lewisham
- Accessing practical ultrasound training
- SpR training when the Faculty of Reproductive & Sexual Health (FSRH) get CSST
- Local GUM service only provides HIV care
- The ratio of FSRH consultants to residents is half that recommended by the FSRH workforce standards
Newham PCT
Family Planning & Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Newham PCT Family Planning & Sexual Health Service is part of Newham PCT. The service is consultant led and is funded via Newham PCT on a block contract.

Access

The service has its doors open for 38 hours per week. Of the 38 hours, 13 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 38% being walk-in and 62% being appointment clinics. Walk-in clinic numbers are capped and calculated on the number of clinician hours available at each session. On rare occasions the service has to turn away a small number of non-emergency patients who are advised to attend the next clinic.

In 2007/08 it is estimated that 80% of patients self-referred, 15% were referrals from primary care, 5% referrals from secondary care.

The service is advertised in service leaflets and on a young people’s website.

Activity

In 2007/08 there were 12,690 attendances at the service. Of these 5,746 were first attendances with 36% of these under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown but it is estimated that 95% of attendances were Newham PCT residents.

Premises

The main premises are considered ‘fit for purpose’ but some satellite premises do not have sufficient clinical space.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women)
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
Level 3

- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Contraception outreach: provided by the young people’s team at various venues weekly. In addition there is a designated contraception nurse for vulnerable/looked after children who visits venues as appropriate and a general domiciliary service available on referral.
- Specialist services for ‘at risk’ groups
- Highly specialised contraception
- Difficult IUD insertion and removal

The service also provides SRE in schools and other settings, a menopause clinic and Dexa scanning for osteoporosis.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>21%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>7%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 33% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the North East London Sexual Health Network. The network Lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Letter of Competence (LoC) Intra Uterine Training
- Letter of Competence (LoC) subdermal implants
- Training of VTS GPs

The service receives no payments for either DFSRH or LoC training.

The service provides the following nursing training:

- Practical training for the post-registration family planning course
- Practical training for cervical cytology

The service receives no payments for nurse training.

The service also provides training for:
• Professionals working with young people
• Pharmacists to give emergency hormonal contraception

The service receives no payment for the above training.

Service changes

The service identified the following constraints /gaps:
• Funding - is insufficient to maintain the service at the current level
• Difficulty in meeting the demand for LARCs
• Difficulty in meeting data collection demands, no electronic patient records.
• Staffing shortages making it difficult to maintain continuity of clinical services: admin support is stretched, difficult for lead clinician to sustain managerial and clinical roles.
Redbridge PCT
Family Planning Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Redbridge PCT Family Planning Service is part of Redbridge PCT. The service is neither consultant nor associate specialist led and is funded via Redbridge PCT on a block contract. In 2008/09 services will transfer to Barking Havering Hospitals as part of an integrated sexual health service that was commissioned via a tendering exercise.

Access

The service has its doors open for 19 hours per week. Of these hours, 11.5 are after 7 pm at night and / or at the weekend.

The service offers mixed access but information on the % of walk-in / appointment clinics was not provided.

The service did not provide data on how patients accessed the service in 2007/08.

The service is advertised in service leaflets and on a young people’s website.

Activity

The service did not provide data on attendances in 2007/08.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown.

Premises

The main premises are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal

Staff

All staff have contracts solely with the service. There are no appointed staff.

The % of staff within the service trained in providing contraception is as follows:
Medical Staff | Nursing staff
---|---
Provision of hormonal contraception | 100% | 100%
Administration of Depo-Provera | 100% | 100%
Implant fitting and / or removal | Data not provided | 0%
IUD fitting and / or removal | Data not provided | 0%

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th></th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP. Treatment is not provided as part of the NCSP.

**Clinical network**

The service is a member of the North East London Sexual Health Network. The Network Lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement.

**Education and Training**

The service provided no medical training and provided no information on any other training they delivered.

**Service changes**

From August 2008 the service will be delivered by Barking, Havering and Redbridge Hospitals Trust. It will be a consultant led reproductive and sexual health service.
Richmond & Twickenham PCT
Contraceptive & Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Richmond & Twickenham PCT Family Planning & Sexual Health Service is part of Richmond & Twickenham PCT. The service is not consultant or associate specialist led; clinical leadership is provided by the Sutton & Merton PCT family planning consultant. The service is funded via Richmond & Twickenham PCT on a block contract. Service level agreements relating to activity are in place.

Access

The service has its doors open for 10 hours per week. Of the 10 hours, 2 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 8.5% being walk-in and 91.5% being appointment clinics.

In 2007/08 it is estimated that 65% of patients self-referred, 20% were referrals from primary care, 5% referrals from secondary care, 5% from voluntary/third sector agencies and 5% from community pharmacists.

The service is advertised in service leaflets, via NHS Direct, via the walk-in centre and on the FPA, Getting it On, Sexwise and Richmond & Twickenham PCT websites.

Activity

In 2007/08 there were 4,296 attendances at the service. Of these 2,371 were first attendances, and of these 62.7% were under 25 years of age.

DNA rates for follow-up appointments were 10%.

In 2007/08 % attendance by PCT of residence is unknown.

Premises

The main premises are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women)
- Simple partner notification
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Symptomatic STI testing & treatment
Level 3

- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Contraception outreach: provided by the Children Looked After (CLA) Team, which works in an integrated way with LA and provides advice to the Youth Offending Team and Adolescent Resource Team who work with young people aged 11-17. Dedicated young peoples services are held twice a week, one in partnership with Richmond Youth service and another with a voluntary sector organisation.
- Specialist services for ‘at risk’ groups including young offenders and specialist young people’s service (KISS)
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult implant removal
- Psychosexual/erectile dysfunction services

The service also provides SRE in schools and other settings, a menopause clinic and Dexa scanning for osteoporosis.

Staff

All staff have contracts with the provider arm of the PCT to deliver the service.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>80%</td>
<td>8%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>8%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100% of staff trained in providing treatment as part of the NCSP.

Clinical Network

The service is a member of the South West London Sexual Health Network. The Network Lead is Dr Paul Lister and the Network Manager is Janine Railton. The network is provider led and has commissioning involvement. The service is also a member of the London Lead Clinicians Group.

Education and Training

The service provides the following medical training:

- FSRH Letter of Competence (LoC) in Intra Uterine Technique
- FSRH Letter of Competence (LoC) in subdermal implants

The service does not receive any funding for this work.

The service provides the following nursing training:

- Clinical placements for the Fertility & Fertility Control Course for which it receives no funding.

The service also provides training for:
• Practical training for the cervical cytology course for which it receives no funding.

Service changes

In 2008/09 the service will receive yet to be identified funding to:

• Re-launch the young people’s sexual health service as part of extended schools in Ham and Petersham.
• Re launch RIOv5.

The service identified the following constraints /gaps:
• Coverage across the borough
• Services for young men
• Workforce shortages
Southwark PCT
Reproductive & Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Southwark PCT Reproductive & Sexual Health Service is part of Southwark PCT. The service is consultant led and is funded via Southwark PCT on a block contract.

Access

The service is delivered from 2 sites, doors open for a total of 74 hours per week. Of the 74 hours, 7 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 84% being walk-in and 16% being appointment clinics. The service triages all patients on registration and emergency patients are always seen within that session. Patient numbers are not capped at walk-in clinics.

In 2007/08 it is estimated that 75% of patients self-referred and 25% were referrals from primary care.

The service is advertised in service leaflets, on the Kings College Hospital website and by NHS Direct.

Activity

In 2007/08 there were 19,208 attendances at the service. Of these 10,246 were first attendances with 39% under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown although the service estimates that 83% of attendances were from Southwark PCT residents.

Premises

The premises from which the service is delivered are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women)
- Simple partner notification
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
- Symptomatic STI testing and treatment (men and women)
Level 3
- Specialist level responsibility for provider quality, teaching and training and clinical governance
- STI outreach
- Contraception outreach, weekly into schools
- Specialist services for ‘at risk’ groups
- Coordination of partner notification
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult implant removal
- Psychosexual / erectile dysfunction services

The service also provides ultrasound scanning where clinically indicated.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>92%</td>
<td>25%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>75%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>33%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100% of staff trained in providing treatment as part of the NCSP.

Clinical network

The service is a member of the South East London Sexual Health Network. The Network Lead is Dr Michael Brady. The network is provider led and has commissioning involvement.

Education and Training

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Letter of Competence (LoC) Intra Uterine Training
- Letter of Competence (LoC) subdermal implants
- Letter of Competence (LoC) Medical Education
- Subspecialty training for RCOG / FRSH
- Training of VTS GPs
- Updates for primary care
- Undergraduate training

The service receives SIFT monies for undergraduate training and funding from the London deanery for subspecialty training.

The service provides the following nursing training:

- Training to fit Implanon
• In-house PGD training

No funding is received for either of the above.

Formal arrangements are in place for the service to provide clinical governance to all healthcare providers within Southwark PCT including: GPs, pharmacists and nurses. The service leads on contraception clinical governance for the sexual health network.

Service changes

In 2008/09 the service will receive increased funding for:

• A new IT system offering self triage and self registration to enable self management. It will be located on both service sites.
• Four new HCA posts to support self management.
• RIO EPR, to offer patient electronic records. Investment to be confirmed.

The service has identified the following gaps / constraints:
  • Medical gynaecology (discussions are taking place with commissioners regarding funding this service)


Sutton & Merton PCT
Family Planning Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Sutton & Merton PCT Family Planning Service is part of Sutton & Merton Primary Care Trust. The service is consultant led and is funded via Sutton & Merton PCT on a block contract.

Access

The service is open for 35.75 hours per week delivered in a variety of settings. Of the 35.75 hours, 25.5 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 90% of services being walk-in and 10% appointment clinics for specialist services. On rare occasions the service has to turn away a small number of non-emergency patients. This tends to occur only when there are staff shortages. Patients are triaged and all emergency patients are seen or directed to another service. All other patients are signposted to the next available clinic.

In 2007/08 the service estimates that 60% of patients self-referred, 30% were referred from primary care, 5% were referred from secondary care, 4% were referred from voluntary or third sector agencies and 1% from ‘other’ sources.

The service is advertised in service leaflets and posters, via the teenage pregnancy team and on the following websites: Getting it On, R U Thinking, Sexwise, NHS Direct and Sutton & Merton PCT.

Activity

In 2007/08 there were 17,858 attendances at the service. Of these 10,662 were first attendances with 34% of these being under 25 years of age.

The DNA rate for new and follow-up appointments in 2007/08 was not collected.

In 2007/08 % attendance by PCT of residence is listed below:

<table>
<thead>
<tr>
<th>PCT of residence</th>
<th>% of attendances in 2007/08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Croydon</td>
<td>4%</td>
</tr>
<tr>
<td>Kingston</td>
<td>1%</td>
</tr>
<tr>
<td>Richmond &amp; Twickenham</td>
<td>0.03%</td>
</tr>
<tr>
<td>Sutton &amp; Merton</td>
<td>89%</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>5%</td>
</tr>
<tr>
<td>Outside London</td>
<td>0.97%</td>
</tr>
</tbody>
</table>

Premises

The service operates from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
• Contraceptive information
• Health promotion
• Condom distribution
• Hormonal contraception / Depo-Provera
• Cervical screening and referral
• Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Symptomatic STI testing and treatment (men and women)
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive outreach provided: domiciliary work for those unable to attend clinics. School nurses from the PCT work in Connexions giving contraceptive and sexual health advice. The family planning service manages the local pharmacy emergency hormonal contraception scheme weekly at Connexions via teenage pregnancy funding; Weekly ‘4 All’ sexual health
• Specialist services for ‘at risk’ groups: educational input to all high schools
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Psychosexual / erectile dysfunction services

Staff

All staff has contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>48%</td>
<td>0%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>96%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>10%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP, treatment is not provided as part of the NCSP.

Clinical network

The service is a member of the South West London Sexual Health Network; contraceptive services are part of a subgroup. The network is provider led with Dr Paul Lister being Clinical Lead and Janine Railton being Network Manager. There is commissioning involvement in the network. The service is also a member of the London Lead Clinicians Group.

Education and Training

The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) Intra Uterine Training
• Letter of Competence (LoC) subdermal implants
• Updates for primary care
• Sessions for medical students from St Georges Hospital

The service receives £300 from trainees for DFSRH for 6 sessions and may charge more for additional sessions and £150 for LoCs. SIFT monies are received for undergraduate sessions.

The service provides the following nursing training:

• Practical training for fertility management course
• In-house training and updates for school nurses, health visitors and others
• Observational visits for nursing students

The service receives limited NMET monies for the fertility management Course and £100 from trainees for a two day introductory course.

The service also provides training for:

• High schools in Sutton & Merton

The service receives recurring baseline funding for this service.

The service provides leadership for the Teenage Pregnancy Coordinators and to Pharmacists providing emergency hormonal contraception under PGD.

Sutton & Merton PCT has an SLA with Richmond & Twickenham PCT to provide medical support and advice and to manage the medical staff in the community clinics in Richmond & Twickenham PCT.

Service changes

In 2008/09 the service will receive increased funding for:

• Chlamydia screening under a LES

The service identified the following constraints /gaps:

• A 3-4% cost pressure saving for 2008 /9 may affect the service
• The new SAS contract for doctors will be a cost pressure
• Uncertainty about the future site for clinical services and administration
• IT issues, data is collected manually at clinics with input occurring at the central office
Tower Hamlets PCT
Women’s & Young People’s Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Tower Hamlets Women’s & Young People’s Service is part of Tower Hamlets Primary Care Trust. The service is consultant led and is funded via Tower Hamlets PCT on a block contract. The service has SLAs in place with an external provider to whom they have partly subcontracted the NCSP and with a private sector abortion organisation to which they have partly subcontracted the abortion service.

Access

The service has its doors open for 68 hours per week. Of the 68 hours, 2 hours are after 7 pm at night and / or at the weekend.

The service offers mixed access. Walk-in clinic numbers are capped when staff capacity is restricted. When this occurs patients are triaged and emergency patients are always seen. Data is not collected on patients turned away.

In 2007/08 it is estimated that 95% of patients self-referred, 5% were referrals from primary care. All Menopause and Pre Menstrual Tension work was referred from secondary care.

The service is advertised in service leaflets and posters, on the service website, via the FPA helpline, via NHS Direct, sexual health & HIV websites, on a freephone information line, in the local press on the radio and in magazines targeting specific groups eg gay Men.

Activity

In 2007/08 there were 18,611 attendances at the service. Of these 4,348 were first attendances with 40% under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown but it is estimated that 95% of attendances were Tower Hamlets PCT residents.

Premises

The service’s main premises are not considered ‘fit for purpose’ due to space restrictions for administration, clinical rooms and the early medical termination service. Community based satellite premises have to be shared and are not necessarily suited to family planning and sexual health work.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women)
- Simple partner notification
- HIV testing (including pre test discussion and giving results)
- Point of care HIV testing
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
• Cervical screening and referral
• Screening and vaccination for Hepatitis B
• Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• STI outreach: Point of care HIV testing in the TB Clinic at the London Chest Hospital
• Contraception outreach: SRE to 3 schools during term time, PRU and University Health days, teenage pregnancy session in secondary schools, weekly contraception and sexual health sessions, monthly drop in sessions and referrals for looked after children, NCSP outreach work presentation to GPs, pharmacists, school nurses, health visitors, midwives, practice nurses, family planning teams, local football teams and people who have access to young people, screening as outreach work, training and ongoing support to people who can be part of the programme. This outreach work is done on an ad hoc basis depending on the demand; however the screening work is a daily activity including evenings and weekends.
• Specialist services for ‘at risk’ groups
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Psychosexual / erectile dysfunction services

The service also provides religious and cultural circumcision for babies up to 5 months, reversal of female genital mutilation, menopause and pre menstrual tension services and management of HIV in the community.

Staff
All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>78%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>78%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>66%</td>
<td>56%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>83%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and / or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>33%</td>
<td>33%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>33%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 92% of staff trained in providing treatment as part of the NCSP.

Clinical network
The service is a member of the North East London Sexual Health Network. The network Lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement.

Education and Training
The service provides the following medical training:
- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Lectures to Hospital junior doctors
- Lectures to GPs
- Lectures and sessions for medical students
- Lectures and supervision of students doing the MSc in Obstetrics & Gynaecology

The service receives £300 from trainees for DFSRH.

The service provides the following nursing training:
- Clinical placements for the post registration family planning course
- Clinical placements for pre registration nurses
- Lectures & workshops in contraception and HIV

The service receives no funding for the above.

**Service changes**

In 2008/09 the service will receive the following new investment:

- HIV point of care testing to high risk groups in collaboration with secondary care and third sector organisations.
- Combined contraception and sexual health service for young people at Levels 1 and 2, in partnership with third sector organisations.

The service identified the following constraints /gaps:
- No HIV testing is done with patients in the abortion service
Waltham Forest PCT
Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Waltham Forest PCT Sexual Health Service is part of Waltham Forest PCT. The service is consultant led and is funded via Waltham Forest PCT. Service level agreements are in place for GUM activity. In 2008/09 the service will receive increased funding for LARCs and community GUM provision.

Access

The service has its doors open for 43 hours per week. Of the 43 hours, 8.5 are after 7 pm at night and / or at the weekend.

The service offers mixed access with 70 % being walk-in and 30% being appointment clinics. Emergency patients are always accommodated via booked slots in every session.

In 2007/08 it is estimated that 60% of patients self-referred, 25% were referrals from primary care, 5% referrals from secondary care and 10% were referrals from the voluntary / third sector.

The service is advertised in service leaflets, on the Waltham Forest PCT website, the FPA website, via the Forest Flavour magazine, schools, GPs and via the youth service.

Activity

In 2007/08 there were 19,336 attendances at the service. Of these 8,342 were first attendances and 19% were under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known as data was not collected.

In 2007/08 % attendance by PCT of residence is unknown.

Premises

The main premises are considered ‘fit for purpose’.

Services offered:

Level 1

- Sexual history taking, risk assessment and signposting
- Asymptomatic STI testing and treatment (men and women) from September 08
- Simple partner notification
- HIV testing including pre test discussion and giving of results from September 08
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Screening and vaccination for Hepatitis B from September 08
- Chlamydia screening as part of the NCSP

Level 2

- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
• Symptomatic STI testing and treatment (men and women) from September 08
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• STI outreach from September 08
• Contraception outreach: domiciliary provision and outreach every day via Teenage Pregnancy outreach nurse
• 6 Young People’s clinics per week (6 young people clinics per week, women with repeat abortions, outreach work with teenage mothers by outreach nurse and in schools)
• Specialist infection management from September 08
• Coordination of partner notification from September 08
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal
• Psychosexual / erectile dysfunction services (limited)

The service also community gynaecology outpatient consultations, diagnostics and some procedures. An African women’s service in relation to female genital mutilation and a vasectomy service.

Staff

All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>100%</td>
<td>20%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>80%</td>
<td>40%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>10%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 60% of staff trained in providing treatment as part of the NCSP.

Activity

In 2007/08 there were 19,336 attendances at the service. Of these 8,342 were first attendances of these 19% were under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known, data was not collected.

In 2007/08 % attendance by PCT of residence is unknown.

Clinical network

The service is a member of the North East London Sexual Health Network. The Network Lead is Dr Celia Skinner and the Network Manager is Tracy Stannard. The network is provider led and has commissioning involvement. The service is also a member of the London Lead Clinicians Network.

Education and Training

The service provides the following medical training:
• Diploma of Royal College of Obstetrics and Gynaecology
• Membership of Royal College of Obstetrics and Gynaecology
• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) in Intra Uterine Techniques
• Letter of Competence (LoC) in subdermal implants
• Postgraduate menopause training
• Medical students from primary care

The service receives £400 from trainees for DFSRH and £300 for LoCs.

The service provides the following nursing training:

• Practical training for the post-registration nurses
• Update days bi-annually

From December 2007 the service charged out of area trainees.

The service also provides training for:

• pharmacists

The service provides advice to primary care and commissioning as necessary.

Service changes

In 2008/09 the service will receive increased funding for:

• Level 1 & 2 community GUM provision (hub and spoke model)
• Pharmacist provision of emergency hormonal contraception to reduce teenage pregnancies (joint with pharmacy).
• Increased LARC provision (Level 3) in primary care.
• Outreach training to GPs to fit LARCs.
• To provide 2 extra LARC sessions within the service.

The service identified the following constraints /gaps:

• RIO being phased in
• IT issues in relation to STI data requirements
Wandsworth PCT
Reproductive Sexual Health Service

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Wandsworth PCT Reproductive Sexual Health Service is part of Wandsworth Primary Care Trust. The service is Associate Specialist led and is funded via Wandsworth PCT on a block contract.

Access

The service is open for 56.5 hours per week. Of the 56.5 hours, 13.75 hours are after 7 pm at night and / or at the weekend.

The service offers mixed access with 90% of services being walk-in and 10% appointment clinics. The service sometimes caps patient numbers at a session based on staff available. On rare occasions the service has to turn away a small number of non emergency patients. This tends to only occur if there are staff shortages. Patients are triaged and all emergency patients are seen or directed to another service. All other patients are signposted to the next available clinic. In 2007/08 400 patients were turned away. The service does not have data on how many were subsequently seen in clinics. Decisions to close a session are taken by the Assistant Director.

In 2007/08 the service estimates that 75% of patients self-referred, 20% were referred from primary care, 3% were referred from secondary care and 2% were referred from voluntary or third sector agencies.

The service is advertised in service leaflets and via websites.

Activity

In 2007/08 there were 22,918 attendances at the service. Of these 8,389 were first attendances with 35% of these being under 25 years of age.

In 2007/08 the DNA rate for new appointments was 10% and 10% for follow-up appointments.

In 2007/08 % attendance by PCT of residence is unknown but it is estimated that 80% of attendances were Wandsworth PCT residents.

Premises

The service operates from premises that are considered ‘fit for purpose’.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Health promotion
- Condom distribution
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
- IUD insertion and removal (including emergency IUD fitting)
- Contraceptive Implant insertion and removal
Level 3

- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Contraceptive outreach provided: 12 hours a week of nurse outreach to local units and the homes of vulnerable adults. Also outreach into schools supporting PHSE programmes.
- Specialist services for ‘at risk’ groups: Point clinics working in collaboration with GUM
- Difficult IUD insertion and removal

Staff

All staff has contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision of hormonal contraception</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>80%</td>
<td>40%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>80%</td>
<td>30%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>Service</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI testing</td>
<td>80%</td>
<td>40%</td>
</tr>
<tr>
<td>STI treatment</td>
<td>80%</td>
<td>40%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>30%</td>
<td>30%</td>
</tr>
</tbody>
</table>

60% of staff trained in chlamydia screening as part of the NCSP. Treatment is not provided as part of the NCSP.

Clinical network

The service is a member of the South West London Sexual Health Network; contraceptive services are part of a subgroup. The network is provider led with Dr Paul Lister being Clinical Lead and Janine Railton being Network Manager. There is commissioning involvement in the network.

Education and Training

The service provides the following medical training:

- Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
- Clinical placements for IUD / IUS Insertion
- Implanon practical training
- Sessions for medical students

The service receives £500 from trainees for DFSRH and £50 per practical session for Implanon / IUD / IUS sessions.

The service provides the following nursing training:

- Practical training for the family planning course at Kingston University

The service receives £30 per session for non PCT employees.

Service changes

Wandsworth PCT is reviewing the way it provides Reproductive Sexual Health Services. It is proposing to redesign the service to best reflect the needs of the community and compliment services being provided by others including primary care and voluntary / third sector agencies. A review of clinical staffing has been
completed and a public consultation is planned for later in 2008 with a view to introducing the new service in 2009/10.

In 2008/09 the service will receive increased funding for:

- Chlamydia screening, treatment and partner notification. Funding will be based on a LES agreement with primary care.

The service identified the following constraints /gaps:

- The need for more joined up working with the GUM service - meetings to be arranged between services to identify a way forward.
- No psychosexual service
- IT needs to be introduced across the service
Westminster PCT  
Contraceptive & Reproductive Health Service  
(provided by Westside Contraceptive Services)

The information in this data sheet was provided by the service through its response to the provider questionnaire. The service was subsequently asked to check this data sheet and make any amendments for accuracy.

General information

The Westside Contraceptive service is part of Westminster PCT. The service is consultant led and is funded via Westminster, Hammersmith & Fulham and Kensington & Chelsea PCTs with Hammersmith & Fulham PCT being the lead commissioner. The service is funded on block contracts with each of the PCTs. From January 2008 Westside Contraceptive Services are running the Chlamydia Screening Office for all three PCTs.

Access

The service has its doors open for 37 hours per week delivered in a variety of settings. Of the 37 hours, 3 are after 7 pm at night and / or at the weekend.

The service offers mixed access with the majority of sessions being appointment clinics that also accept walk-in patients up to the capacity of the session. If service capacity is reached clients walking in are triaged to alternative sessions unless they are an emergency in which case they will be seen. Senior clinicians are always available at the hub for consultation on urgent medical issues. Data is not collected on the numbers of patients turned away.

In 2007/08 the service estimate that 83% of patients self-referred, 10% were referrals from primary care, 5% were referrals from secondary care and 2% were referrals from the voluntary / third sector.

The service is advertised in service leaflets, the yellow pages, Westminster PCT website and on the FPA website.

Activity

In 2007/08 there were 4,164 attendances at the service. Of these 2,775 were first attendances with 17% of these being under 25 years of age.

DNA rates for new appointments and follow-up appointments are not known, data was not collected.

In 2007/08 data on % attendance by PCT of residence was not collected.

Premises

The service considers that its premises are not ‘fit for purpose’ as some sites have problems with Reception facilities and IT, space and privacy, equipment and storage.

Services offered:

Level 1
- Sexual history taking, risk assessment and signposting
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Condom distribution
- Health promotion
- Hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2
• IUD insertion and removal (including emergency IUD fitting)
• Contraceptive Implant insertion and removal
• Counselling and referral for vasectomy

Level 3
• Specialist level responsibility for provider quality, teaching and training and clinical governance
• Contraceptive outreach
• Highly specialised contraception
• Difficult IUD insertion and removal
• Difficult implant removal

Staff
All staff have contracts solely with the service. There are no jointly appointed staff.

The % of staff within the service trained in providing contraception is as follows:

<table>
<thead>
<tr>
<th>Provision of hormonal contraception</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of Depo-Provera</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Implant fitting and / or removal</td>
<td>40%</td>
<td>20%</td>
</tr>
<tr>
<td>IUD fitting and / or removal</td>
<td>70%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The % of staff within the service trained in providing testing and or treatment of sexually transmitted infections excluding those managed under the NCSP is as follows:

<table>
<thead>
<tr>
<th>STI testing</th>
<th>Medical Staff</th>
<th>Nursing staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI treatment</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>Specialist infections management (Level 3)</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

100% of staff is trained in chlamydia screening as part of the NCSP with 100% of staff trained in providing treatment as part of the NCSP.

Clinical network
The service is not a member of a clinical network.

Education and Training
The service provides the following medical training:

• Diploma of Faculty of Sexual & Reproductive Health (DFSRH)
• Letter of Competence (LoC) Intra Uterine Training
• Letter of Competence (LoC) subdermal implants
• Refresher sessions for GPs
• Undergraduate sessions for medical students at Imperial.

The service receives £300 from trainees for DFSRH.

The service provides the following nursing training:

• Clinical training for the contraception course at Thames Valley University

The service receives £300 per candidate.

The service also provides clinical governance for PGDs for emergency hormonal contraception and Azithromycin and pharmacies. It also advises commissioners and others regarding relevant LES for primary care and community pharmacy.
Service changes

There are no plans for increasing funding except in relation to management of the chlamydia screening office (from January 2008).

In 2008/09 the service is re-organising its structure, skill mix and opening times.
## Appendix 10 – Non-NHS providers in London 2007/08

### Brook and THT

<table>
<thead>
<tr>
<th>Non-NHS providers commissioned by PCTs in London 2007/08</th>
<th>Access</th>
<th>Activity</th>
<th>STI testing &amp; treatment</th>
<th>Outreach</th>
<th>Contraception</th>
<th>NCSP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total hours open (per week)</td>
<td>Number of hours open after 7pm or at weekends</td>
<td>% of hours open after 7pm or at weekends</td>
<td>type of access: Walk-in / Appointment / Mixed</td>
<td>Number of attendances to the service</td>
<td>Number of these under 25</td>
<td>Level 1</td>
</tr>
<tr>
<td><strong>North Central London</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Camden PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brook Euston Clinic</td>
<td>33.0</td>
<td>2.0</td>
<td>6%</td>
<td>walk-in</td>
<td>9,503</td>
<td>100%</td>
</tr>
<tr>
<td>THT Kilburn Youth Centre</td>
<td>3.0</td>
<td>3.0</td>
<td>100%</td>
<td>walk-in</td>
<td>76*</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Islington PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THT City YMCA</td>
<td>6.0</td>
<td>4.5</td>
<td>75%</td>
<td>walk-in</td>
<td>480</td>
<td>100%</td>
</tr>
<tr>
<td>THT Chlamydia Screening Programme**</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Islington PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THT City YMCA</td>
<td>6.0</td>
<td>4.5</td>
<td>75%</td>
<td>walk-in</td>
<td>480</td>
<td>100%</td>
</tr>
<tr>
<td>THT Chlamydia Screening Programme**</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>North East London</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Barking &amp; Dagenham PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brook Barking Clinic, Vicarage Fields</td>
<td>2.0</td>
<td>2.0</td>
<td>100%</td>
<td>walk-in</td>
<td>371</td>
<td>100%</td>
</tr>
<tr>
<td>THT Chlamydia Screening Programme**</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>City &amp; Hackney PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THT Ajaamu</td>
<td>6.0</td>
<td>-</td>
<td>-</td>
<td>walk-in</td>
<td>150*</td>
<td>100%</td>
</tr>
<tr>
<td>Brook Condom Scheme</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Newham PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THT Programme to support local CSO</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Redbridge PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brook Ilford Clinic &amp; Outreach</td>
<td>4.5</td>
<td>2.5</td>
<td>56%</td>
<td>walk-in</td>
<td>862</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Tower Hamlets PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THT Eastside</td>
<td>4.0</td>
<td>1.5</td>
<td>38%</td>
<td>walk-in</td>
<td>58</td>
<td>100%</td>
</tr>
<tr>
<td>THT Community expanded access to testing*</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

*service commenced July 2007

**commissioned jointly with Barking & Dagenham, Redbridge and Waltham Forest PCTs

*service closed June 2008

*commissioned jointly with Newham PCT
## Non-NHS providers commissioned by PCTs in London 2007/08

<table>
<thead>
<tr>
<th>Access</th>
<th>Activity</th>
<th>STI testing &amp; treatment</th>
<th>Outreach</th>
<th>Contraception</th>
<th>NCSP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total hours open (per week)</td>
<td>Number of hours open after 7pm or at weekends</td>
<td>% of hours open after 7pm or at weekends</td>
<td>type of access: Walk-in / Appointment / Mixed</td>
<td>Number of attendances to the service</td>
<td>Number of these under 25</td>
</tr>
<tr>
<td><strong>North West London</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Brent PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brook Stonebridge Park &amp; Outreach</td>
<td>2.5</td>
<td>0.0</td>
<td>0%</td>
<td>-</td>
<td>235</td>
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<tr>
<td><strong>Harrow PCT</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Brook Clinic</td>
<td>data not provided</td>
<td></td>
<td></td>
<td></td>
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<td><strong>Hillingdon PCT</strong></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Brook Hesa-Hayes</td>
<td>5.5</td>
<td>4.0</td>
<td>73%</td>
<td>walk-in</td>
<td>1,593</td>
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<tr>
<td><strong>Kensington &amp; Chelsea PCT</strong></td>
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</tr>
<tr>
<td>Brook Outreach SRE worker</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1,680</td>
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<tr>
<td>THT Lighthouse West (HIV POCT)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>294</td>
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<td><strong>Westminster PCT</strong></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Brook Berwick Street (Homeless drop-in)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>walk-in</td>
<td>417</td>
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<td><strong>South West London</strong></td>
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<td></td>
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<td></td>
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<td><strong>Wandsworth PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brook BYM work (outreach to boys and young men)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
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</tr>
<tr>
<td><strong>South East London</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Lambeth PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brook Brixton Clinic</td>
<td>22.5</td>
<td>2.5</td>
<td>11%</td>
<td>walk-in</td>
<td>6,271</td>
</tr>
<tr>
<td>Brook SHARES</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>3,361</td>
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<tr>
<td>THT Lighthouse South (HIV POCT)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>214</td>
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<td><strong>Southwark PCT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brook East Street Clinic</td>
<td>28.0</td>
<td>3.0</td>
<td>11%</td>
<td>walk-in</td>
<td>6,226</td>
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<tr>
<td>Brook Outreach Post</td>
<td>-</td>
<td>-</td>
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<td>THT Peckham Pulse (HIV POCT)</td>
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</table>
British Pregnancy Advisory Service (BPAS) were invited to provide information about the contracts they held with London PCTs in 2007/08. The table below is based on the details they volunteered.

<table>
<thead>
<tr>
<th>Services offered</th>
<th>Locations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultation</td>
<td>Caryl Thomas Clinic HA1 4UQ</td>
</tr>
<tr>
<td>Early Medical Abortion</td>
<td>Kilburn Square NW6 6PS</td>
</tr>
<tr>
<td>Medical 10-24 weeks</td>
<td>Willesden Centre NW10 3RY</td>
</tr>
<tr>
<td>Manual Vacuum Aspiration</td>
<td>Finsbury Park N4 3EL</td>
</tr>
<tr>
<td>Surgical to 14 weeks</td>
<td>Leighton Clinic SW16 2QA</td>
</tr>
<tr>
<td>Surgical to 16 weeks</td>
<td>London Central WC1B 3HP</td>
</tr>
<tr>
<td>Surgical to 24 weeks</td>
<td>North London N18 1QX</td>
</tr>
<tr>
<td>Contraception (including coil fitting)</td>
<td>Rosslyn Clinic TW1 2AR</td>
</tr>
<tr>
<td>Central booking services</td>
<td>*North Middlesex Hospital</td>
</tr>
<tr>
<td>Follow-up calls to under 18s</td>
<td></td>
</tr>
<tr>
<td>Self-referrals</td>
<td></td>
</tr>
<tr>
<td>Mirena and implantation</td>
<td></td>
</tr>
<tr>
<td>Vasectomy</td>
<td></td>
</tr>
<tr>
<td>Chlamydia testing</td>
<td></td>
</tr>
</tbody>
</table>

### Services offered

- **Services offered**
  - Consultation
  - Early Medical Abortion
  - Medical 10-24 weeks
  - Manual Vacuum Aspiration
  - Surgical to 14 weeks
  - Surgical to 16 weeks
  - Surgical to 24 weeks
  - Contraception (including coil fitting)
  - Central booking services
  - Follow-up calls to under 18s
  - Self-referrals
  - Mirena and implantation
  - Vasectomy
  - Chlamydia testing

### Locations

- **Locations**
  - Caryl Thomas Clinic HA1 4UQ
  - Kilburn Square NW6 6PS
  - Willesden Centre NW10 3RY
  - Finsbury Park N4 3EL
  - Leighton Clinic SW16 2QA
  - London Central WC1B 3HP
  - North London N18 1QX
  - Rosslyn Clinic TW1 2AR

- **Bexley PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Brent PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Bromley PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Camden PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Ealing PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Enfield PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Greenwich PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Hammersmith & Fulham PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Haringey PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Harrow PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Hounslow PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Kingston PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Lambeth, Southwark, Lewisham PCTS**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Newham PCT**
  - Yes
  - Yes (from 10-24 weeks)
  - Yes (from 10-24 weeks)
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Sutton & Merton PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Wandsworth PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Westminster PCT**
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

- **Other:**
  - Homerton (City & Hackney PCT)
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes
  - Yes

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343
Marie Stopes International (MSI) were invited to provide information about the contracts they held with London PCTs in 2007/08. The table below is based on the details they volunteered.

<table>
<thead>
<tr>
<th>Services offered</th>
<th>Locations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultation</td>
<td>Ealing</td>
</tr>
<tr>
<td>Counselling</td>
<td>South London</td>
</tr>
<tr>
<td>Early Medical Abortion (to 9 weeks)</td>
<td>Essex</td>
</tr>
<tr>
<td>Surgical to 24 weeks *</td>
<td>Central London</td>
</tr>
<tr>
<td>24 hours post op care (including counselling)</td>
<td></td>
</tr>
<tr>
<td>Contraception at time of TOP (IUCD, Depo, Oral)</td>
<td></td>
</tr>
<tr>
<td>Chlamydia testing (as opt out)</td>
<td></td>
</tr>
<tr>
<td>Mirena</td>
<td></td>
</tr>
<tr>
<td>Implanon</td>
<td></td>
</tr>
<tr>
<td>Vasectomy</td>
<td></td>
</tr>
<tr>
<td>Barking &amp; Dagenham PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Barnet PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Bexley PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Brent PCT</td>
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<td>Bromley PCT</td>
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<tr>
<td>Camden PCT</td>
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</tr>
<tr>
<td>Croydon PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Ealing PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Greenwich PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Hammersmith &amp; Fulham PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Harrow PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Havering PCT</td>
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</tr>
<tr>
<td>Hillingdon PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Hounslow PCT</td>
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</tr>
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<td>Islington PCT</td>
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<tr>
<td>Lambeth PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Lewisham PCT</td>
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<td>Redbridge PCT</td>
<td>yes</td>
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<td>Southwark PCT</td>
<td>yes</td>
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<td>Sutton &amp; Merton PCT</td>
<td>yes</td>
</tr>
<tr>
<td>Tower Hamlets PCT (sub-contract with Mile End Hospital)</td>
<td>yes</td>
</tr>
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<td>Waltham Forest PCT</td>
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</tr>
<tr>
<td>Westminster PCT</td>
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</tbody>
</table>

* with choice of local anaesthetic, conscious sedations or general anaesthetic depending on gestation