

Nottingham City Council Delegated Decision



Nottingham
City Council

Reference Number:

4092

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Department:

Strategy and Resources

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Subject:

Online Chlamydia Testing

Total Value:

118,874 (Type: Revenue)

Decision Being Taken:

To retrospectively:

- 1) approve spend of £118,874 for online distribution of chlamydia screening kits from 1/4/2020 to 31/3/2022, at £59,437 per year;
- 2) approve procurement of the contract to service provider approved G-cloud framework (a nationally approved framework for public sector organisations); and
- 3) delegate authority to the Head of Contracting and Procurement to sign the final contract in respect of the service.

Reasons for the Decision(s)

This decision was raised in March 2020 and advice was provided. This contract had already been called off from a national framework, however the decision remained left unsigned. The contract has been in place and functional since 1st April 2020.

One of the sexual health priorities in the Public Health Outcomes Framework (PHOF) is to 'achieve a detection rate of 2,300 per 100,000 for chlamydia screening (15-24 year olds)'. This is an indicator of how accurately those most at risk are targeted and tested.

Key facts regarding Chlamydia:

- In 2018, there were 436,260 new Sexually Transmitted Infection (STI) diagnoses made at sexual health services in England. Of these, the most commonly diagnosed STIs were chlamydia (n 213,785) (around 50% of all new STI diagnoses). Of these, 131,269 chlamydia diagnoses occurred amongst under 25 year olds.
- Chlamydia is the most commonly diagnosed sexually transmitted infection (STI) in the UK with sexually active young people at the highest risk of infection. Nationally, Public Health England (PHE) estimate that around 70%-80% of young adults with chlamydia will be unaware they have the infection.
- Chlamydia often has no symptoms but can lead to a wide range of complications/ serious health consequences, and represents a substantial public health problem. The prevalence of infection is highest in young sexually active young adults (15 to 24 years olds). Gay, bisexual, and other men who have sex with men are also at risk.
- By offering a range of opportunistic chlamydia screening of young adults who are sexually active and without symptoms, allows for the earlier detection of chlamydia infection which can be easily treated and also reduces onward transmission and the consequences of untreated infection.
- Chlamydia testing in non-genitourinary medicine (GUM) settings can also be more efficient and by offering young people additional choice of testing services increases the normalisation and de-stigmatisation of STI testing, making young people more able to and willing to take responsibility for their sexual health.
- Public Health England (PHE) recommends screening of sexually active young adults annually or on change of partner.
- In 2018 the guidance on treatment for chlamydia was changed due to the increasing antimicrobial resistant nature of the disease.

Key facts for Nottingham City:

- In 2018, the chlamydia detection rate for Nottingham City was 1,928 per 100,000 15-24 year olds. Only 18% of the eligible population was screened.
- The chlamydia diagnostic rate amongst people of all ages in Nottingham in 2018 was 635 per 100,000. Around 65% of these diagnoses were amongst people aged under 25. This was the second highest amongst Nottingham's statistical neighbours.
- The current online chlamydia testing service targeted at 15-24 year olds in Nottingham was re-contracted in 2019 for a period of twelve months following withdrawal from the provider of the time. Additional gonorrhoea testing was added to the offer free of charge to Nottingham City Council.
- During the year 2019-20 Nottingham has experienced an almost 100% increase in demand from previous years with around 5000 kits being ordered. Efficiency of the service has been assessed and the test return rates, positivity rates and wastage of kits has been satisfactory to the terms of the contract and in comparison to indicators elsewhere.

A key outcome of the current service within Nottingham City is to contribute to the reduction of the prevalence of chlamydia in young people aged 15 to 24 years; provide choice by providing additional access to chlamydia screening (increasing access addresses perceptions of stigma) and increase the awareness of chlamydia in young people.

Other Options Considered:

Do nothing - this will leave a significant 'gap' in provision of screening services, evidence suggests that those accessing digital services are the ones less likely to access terrestrial services. This will be a backward step for the City in terms of direction of travel towards smart cities and digital services. Much of the country has already made significant progress towards digital front doors, online consultations and online contraception for sexual health services. Therefore this option was rejected.

Continue with the current provider - after receiving estimates from another provider, it is evident that the current provider is no longer offering the best value for money option. Therefore this option was rejected.

Carry out an open procurement exercise to invite expressions of interest - this option was discounted because the G-cloud public sector framework offers a suitable provider who can deliver this service with improved value for money.

This proposal is for maximum term of 2 years which will allow sufficient time to align to the current Nottingham City Council Strategic Commissioning Review of the local sexual health 'system' where other delivery models will be considered.

Background Papers:

None

Published Works:

None

Affected Wards:

Citywide

Colleague / Councillor Interests:

None

Consultations:

Those not consulted are not directly affected by the decision.

Crime and Disorder Implications:

Online sexual health screening services are likely to attract young people who otherwise would not access face to face services. This increases their chance of timely diagnoses and treatment and provides a springboard for vulnerable young people into other services and increases the likelihood of them accessing support as victims of crime such as child sexual exploitation, trafficking and sexual violence.

Equality:

EIA not required. Reasons: No change to citizen access or to an existing policy or function.

Social Value Considerations:

The value of this service will not exceed the EU threshold. This is a specialist clinical service which can only be provided by accredited providers, there is no competitive provider market for this locally.

Regard for NHS Constitution:

Local authorities have a statutory duty to have regard to the NHS Constitution when exercising their public health functions under the NHS Act 2006. In making this decision relating to public health functions, we have properly considered the NHS Constitution where applicable and have taken into account how it can be applied in order to commission services to improve the health of the local community.

Decision Type:

Portfolio Holder

Subject to Call In:

No

The call-in procedure does not apply to the proposed decision because the delay likely to be caused by the call in process would seriously prejudice the Council's or the public's interests. The Chair of the Overview and Scrutiny Committee (or Vice-Chair) in his/her absence has been consulted and agreed both that the decision proposed is reasonable in all circumstances and that it should be treated as a matter of urgency.

Person Consulted: Retrospective decision

Consultation Date: 07/01/2021

The decision is retrospective and therefore not able to be called in.

Advice Sought:

Legal, Finance, Procurement

Legal Advice:

This procurement complies with the public procurement rules and the Council's Contract Procedure Rules in that the proposed contract will be a call off from the Crown Commercial Services Gcloud framework. Advice provided by Sarah O'Bradaigh (senior solicitor) on 27/02/2020. Advice provided by Jane Garrard (Senior Governance Officer) on 01/12/2020. Advice provided by Sarah O'Bradaigh (senior solicitor) on 05/01/2021.

Finance Advice:

This decision seeks to provide approval for continued expenditure for online distribution of chlamydia screening kits from 1/4/2020 to 31/3/2022. The total costs of this proposal over two years is £118,874, each year of the contract being £59,437.

Within the current planned expenditure of Public Health grant for 2020/21, there is provision to fund online chlamydia screening and this will remain the case in subsequent years, therefore the costs of this decision are funded through the Public Health grant without additional pressure to the Council.

Advice provided by Graeme Black (Commercial Business Partner) on 08/12/2020.

Procurement Advice:

The Decision to procure a contract for Online Chlamydia Screening at a value £59,437 per annum for up to two years from 1/4/2020 is supported by Procurement. The Call-off from the CCS G-Cloud 11 Framework was supported by the Procurement Team. Advice provided by Nicola Harrison (Procurement Lead Officer) on 09/12/2020.

Signatures

Eunice Campbell-Clark (Portfolio Holder Health, HR and Equalities)

SIGNED and Dated: 14/01/2021

Alison Challenger (Director of Public Health)

SIGNED and Dated: 12/01/2021