

# KENT COUNTY COUNCIL – PROPOSED RECORD OF DECISION

## DECISION TO BE TAKEN BY:

Cabinet Member for Adult Social Care and Public Health

## DECISION NO:

25/00041

**For publication** *[Do not include information which is exempt from publication under schedule 12a of the Local Government Act 1972]*

**Key decision: YES**

**Subject Matter / Title of Decision:** Public Health Service Transformation - Sexual Health Service

### Decision:

As Cabinet Member for Adult Social Care and Public Health, I propose to:

- I. **APPROVE** the proposed Sexual Health Services commissioning model and agree to the re-commissioning and award of contracts relating to Kent's Sexual Health services effective from 1 April 2026 for a maximum of 5 years.
- II. **AGREE** that Kent County Council extend the Section 75 agreement with the Integrated Care Board and for KCC to commission HIV treatment and care services together in line with current arrangements.
- III. **DELEGATE** authority to the Director of Public Health to take relevant actions, including but not limited to, entering into and finalising the terms of relevant contracts or other legal agreements, as necessary, to implement the above decision.
- IV. **DELEGATE** authority to the Director of Public Health, in consultation with the Cabinet Member for Adult Social Care and Public Health, the exercise of any extensions permitted in accordance with the extension clauses within the contracts.

**Background:** The provision of sexual health services aligns with national strategies such as the [Women's Health Strategy for England](#) by the Department of Health and Social Care (2022) and delivers to the [Public Health Outcomes Framework](#), which aims to focus commissioned service delivery on areas which will have a positive impact upon public health outcomes for the population. Furthermore, the sexual health services in Kent align to and meet the expectations of the Office of Health Improvement and Disparities policy '[Sexual and reproductive health and HIV: applying all our health](#)'.

Locally, the provision of the services supports [the Kent and Medway Integrated Care Strategy](#) and delivers the recently published [Kent Sexual Health Needs Assessment 2024](#).

The sexual health service contracts in scope of this decision, which are due to expire on 31 March 2026, are:

- West Kent Specialist Integrated Sexual Health Service including HIV treatment and care (Maidstone, Gravesend, Dartford, Tonbridge & Malling, Tunbridge Wells, Sevenoaks) – Provided by Maidstone and Tunbridge Wells NHS Trust (MTW). The contract commenced on 1 April 2019.

- East Kent Specialist Integrated Sexual Health Service including HIV treatment and care (Swale, Canterbury, Thanet, Dover, Folkestone & Hythe, Ashford) – Provided by Kent Community Health NHS Foundation Trust (KCHFT). The contract commenced on 1 April 2020.
- Psychosexual Therapy (Kent wide) – Provided by KCHFT. The contract commenced on 1 April 2020.
- Community Pharmacy Sexual Health Service (Kent wide) – Sub-contracted to Kent pharmacies by KCHFT. The contract commenced on 1 April 2020.
- Online Sexually Transmitted Infection (STI) Testing service (Kent wide) – E-Bureau patient management team provided by MTW, the contract for testing kits and laboratory access is sub-contracted to Preventx by MTW. The contract commenced on 1 April 2019.

### **Reason(s) for decision:**

Kent County Council (KCC) has a statutory duty to provide certain sexual health services as per Section 6 of The Local Authorities (Public Health Functions and Entry to Premises by Local Health Watch Representatives) Regulations 2013. These include the three broad responsibilities of:

- I. Testing and treatment for sexually transmitted infections (STIs) excluding the treatment of Human Immunodeficiency Virus (HIV).
- II. Advice on, and reasonable access to a broad range of contraceptive substances and appliances.
- III. General advice and promotion of key messages to enable positive sexual health outcomes and to prevent ill sexual health.

STIs and unplanned pregnancies are significant contributors to poor health outcomes, and provision of these statutory services plays an important role in reducing the negative consequences and costs of ill sexual health. Negative consequences include but are not limited to psychological consequences, poor educational, social and economic impacts for teenage mothers, young fathers and their children, as well as a range of physical health risks including pelvic inflammatory disease which can lead to infertility, ectopic pregnancy, cervical cancer, cardiovascular and neurological complications, further infections and sepsis.

Several sexual health service contracts are due to expire on 31 March 2026 and therefore a key decision is required to plan for beyond this date to ensure KCC is compliant with its statutory duties.

KCC is currently in a partnership arrangement with its commissioned east Kent and west Kent Integrated Sexual Health Service providers, however, due to changes in procurement legislation, this contractual option is no longer available and therefore these services need to be re-commissioned.

An options appraisal was developed which considered a range of changes to the service model, based on collaboration with key stakeholders, a peer review exercise, a public insights report and a review of the marketplace.

The recommended option identified is to maintain and strengthen these services to ensure the council meets its statutory obligation, whilst utilising the learning obtained from engagement with stakeholders to enhance delivery in future contracts, creating a more uniform and equitable approach to delivery across West and East Kent to attain value for money.

Future service model principles are:

- Enhanced integration within the existing services by aligning contracts to geographical areas and fostering collaboration between providers.
- Equitable service as service users receive the same service regardless of geographical area in the county.
- Value for money benefits demonstrated with focus on outcomes.
- Smoother service user pathways as psychosexual therapy and the E-Bureau function become embedded into the integrated service for the service user's geographical provider.
- Opportunities for collaboration, sharing of best practice and fostering a whole systems approach.

**How the proposed decision supports the [Framing Kent's Future - Our Council Strategy 2022-2026](#)**

Locally, the services support the levelling up agenda and integrated model of care outlined in the KCC strategic plan 2022-26 (Framing Kent's Future).

**How the proposed decision supports Securing Kent's Future 2022 -2026: [Securing Kents Future - Budget Recovery Strategy.pdf](#)**

The proposed decision supports Securing Kent's Future 2022-2026 as a full review of options has been completed that included and prioritised best value, alongside ensuring our statutory minimum duty has been reviewed.

**How the proposed decision supports the Kent and Medway Integrated Care Strategy [Kent and Medway Integrated Care Strategy](#)**

Sexual Health services, in collaboration with partners across the system, contribute to the Kent and Medway Integrated Care Strategy by supporting happy and healthy living for all through a preventative and early identification approach to STIs. Furthermore, this decision specifically will allow for greater focus on reducing health inequalities. Sexual health also supports giving young people the best start in life through health promotion and prevention elements of the contracts. Finally, services aim to empower patients and carers through the contributions to improvement in health and care services.

**Financial Implications**

The funding for these contracts is from the Public Health Grant and the ICB for the HIV treatment and care element. The total estimated funding commitment from KCC for this decision is approximately £70.3m over 5 years.

Factors such as the funding levels provided via the annual PH grant to KCC, uplifts to the annual national agreement for the NHS Agenda for Change staff pay award scheme, and levels of activity may influence the actual annual value of the contract.

In the unlikely event that the grant in future years is insufficient to cover the contract value, prices or activity levels will be renegotiated to fit the available budget.

In addition to these services, the Public Health Grant is also invested into property services to provide premises in which these statutory sexual health services are delivered.

Strategies to maximise service efficiencies, offer best value, and maximise outcomes for people accessing the services will include exploration of digital options, a more restricted focus on services with highest return on investments such as online testing, and an increase in prevention work to stop and reduce the short, medium and long-term financial costs

NHS England (NHSE) has had a long-standing statutory obligation to provide HIV treatment and care services. To promote a more integrated approach and seamless patient experience, KCC entered into a Section 75 agreement with NHSE to incorporate HIV treatment and care services into the KCC-commissioned sexual health service offer. In the financial year 2025/26, the statutory responsibility for

commissioning HIV treatment and care services is transferring from NHSE to the Kent and Medway Integrated Care Board (ICB). KCC will continue to deliver a Section 75 agreement with the ICB to continue providing these services.

### **Equalities Implications**

An Equality Impact Assessment (EqIA) has been completed for the service. Current evidence suggests that there are no negative impacts to people because the service model is not reducing or changing in nature. This recommendation is an appropriate measure to advance equality and create stability for vulnerable people.

The EqIA will continue to be reviewed throughout the length of the contractual period.

### **Data Protection Implications**

A Data Protection Impact Assessment (DPIA) will be completed by Kent County Council in conjunction with the providers following agreement of the approach by the Cabinet Committee. These documents will relate to the data that is shared between Kent County Council, the providers and the Office for Health Improvement and Disparities and any other services or organisations involved with the data. This will serve to identify, analyse and minimise data related risks. This will meet the councils' legal requirements as set out in the General Data Protection Regulations.

The DPIA will be updated following contract award and prior to the contract commencement date, to ensure it continues to have the most up-to-date information included and reflect any changes to data processing because of the specification enhancements. The DPIA will be reviewed throughout the life of the contract..

### **Legal Implications**

Under the Health and Social Care Act 2012, Directors of Public Health (DPH) in upper tier and unitary Local Authorities have a specific duty to protect and enhance the population's health.

KCC commissions the services set out in this paper as part of its statutory responsibilities and as a condition of its Public Health Grant. These responsibilities are outlined in Section 6 of The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013.

The recommissioning of these services will be compliant with the Provider Selection Regime (PSR) introduced under the Health and Care Act 2022. Appropriate legal advice is being sought.

### **Cabinet Committee recommendations and other consultation:**

The proposed decision will be discussed at the Adult Social Care and Public Health Cabinet Committee on 8 July 2025 and the recommendations included in the paperwork which the Cabinet Member will be asked to sign.

### **Any alternatives considered and rejected:**

- **Keep all current services the same – no change / do nothing** – Whilst the services will mostly remain the same, a greater focus on consistency and integration in the geographical provider's offers was deemed necessary to generate efficiencies and enhancements, hence the rejection of this option.

- **Discontinue / decommission the services** – Decommissioning the service was concluded as a non-viable option that would place KCC in breach of the Public Health grant conditions. KCC has statutory responsibilities to provide sexual health services.
- **Add more to the service offer – do the maximum** – Whilst this would be beneficial for Kent residents, there is no additional funding to enhance the service in a manner which requires more financial investment. As the service is meeting statutory obligations and performance expectations, further enhancements can be delivered via efficiencies within the existing financial envelope.

**Any interest declared when the decision was taken and any dispensation granted by the Proper Officer:**

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signed

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date