

DIRECTION FROM THE SHETLAND ISLANDS INTEGRATION JOINT BOARD (“IJB”)

ISSUED UNDER SECTION 26(1) OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

Direction: Sexual Health Services	Direction to: NHSS	Overall Budget allocated by IJB for Direction: £26, 954
Reference Number: 1.15	Relevant Function(s): Sexual Health service provision (Sexual Health Strategy sits within Public Health, services are aligned to this)	Review Date: March 2024
IJB Report(s) Reference Number: CC-30-23		
Date Direction issued/authorised by IJB: 29 June 2023	Date Direction takes effect: 1 April 2023	Does the Direction supersede, amend or revoke an existing Direction? If yes, include reference number of existing Direction: <i>Supersedes DIR002.8/09.03.22/CC-07-22-F (note previous direction “Hospital Based Services” has been split into 3 component parts – Unscheduled Care, Sexual Health Services, Renal Services)</i>
Purpose of Direction		
Delivery of sexual health services as delegated to the IJB.		
Accountability and Governance		
NHS Shetland is accountable for the delivery of the services within this Direction, which have been commissioned by the Integration Joint Board (IJB).		

Overarching Directions to Function(s)	
Directions:	Performance / Objective(s):
<p>Sexual Health</p> <p>The Sexual Health Service provided by the Acute & Specialist Services Directorate</p> <ul style="list-style-type: none"> • A service to support the prevention, detection and management of sexually transmitted infections – which includes a Sexual Health Clinic • A pathway to support people who have experienced rape or sexual assault to access health screening and signposting to other relevant services • An abortion care pathway • Providing emergency contraception to people who would otherwise find it difficult to access family planning services • Health Improvement and Education provided by a wide range of professionals including: GPs, Midwives and School Nurses <p>The sexual health strategy sits in the Public Health portfolio</p> <p>Family planning services sit in the Community Health & Social Care portfolio</p> <p>Budget: £26,954</p>	<p>That we meet the standards set by Healthcare Improvement Scotland published Sexual Health in 2022 aiming to ensure that:</p> <ul style="list-style-type: none"> • harm is reduced through early intervention and improved access • people are treated with compassion and respect, with their rights upheld, and • people experience a service that is free from stigma. <p>The standards cover the following areas:</p> <ul style="list-style-type: none"> • leadership and governance • shared and supported decision making • education and training • access to sexual health care • sexual well-being • prevention, detection and management of sexually-transmitted infections • services for young people • reducing sexual health inequalities • preventing unintended pregnancy, and • abortion care. <p>That we meet the standards set by Healthcare Improvement Scotland for Healthcare and forensic medical services for people who have experienced rape, sexual assault or child sexual abuse: Children, young people and adults standards</p>

Improvement Plan

Expected Outcomes	Key Actions/ Milestones (inc dates)	Target	Risks (detail in risk table below)	Savings/ funding (amount and source)	Ref. and linked priorities
<p>We will provide appropriate access to sexual health services in Shetland with the right MDT structure to support. We will deliver as much care in Shetland as it is safe to do so, in line with:</p> <p>HIS Sexual Health Standards</p> <p>HIS Healthcare and forensic medical services for people who have experienced rape, sexual assault or child sexual abuse: Children, young people and adults standards</p>	<p>Business Case has been developed to set out the requirements to deliver a sustainable service, following completion of pathways, a service model and staffing review to provide services that meet standards. The case for funding to develop sustainable service provision was not supported by the NHS or the IJB which means that we do not have a sustainable workforce.</p> <p>**Note concurrent related work in Community Nursing, with specialist ANP working to develop Sexual Health skills in Primary Care with view to creating more sustainability and equity of service through increased community provision – this change will not solve immediate problem of service fragility**</p>	<p>Continue to deliver services within available resource flagging current risks.</p> <p>Work with Public Health and other partners to support alignment of sexual health services to Sexual Health Strategy when review is completed – this will support informed decision making around funding etc.</p>	<p>Workforce capacity – core service (1)</p> <p>Finance (2)</p> <p>Unable to provide adequate sexual health service (3)</p>	<p>Funding required to deliver sustainable service – not yet identified, adding pressure to other services (ED, Maternity)</p>	<p>Prevention, Early Intervention</p> <p>Tackling Inequalities</p>

#	Risk	Consequences	Control Measures
1	Workforce capacity – core service	Unable to deliver full service, triaged by clinical need resulting in provision of minimum/emergency service only. Poorer patient outcomes due to delays, increased waiting times, does not deliver prevention/early intervention priorities.	Utilise network of services to provide appropriate support. Review alternative for funding and staffing. Retain links with regional services in event of inability to provide locally.
2	Finance	Unable to provide services substantively. Unable to retain staff in temporary posts. Decreased service scope, poorer patient outcomes, unable to meet national standards for service delivery. Increased inequalities.	Flag risks at service and directorate level as appropriate.
3	Unable to provide adequate sexual health service	Services do not meet national standards and do not meet the needs of our population. Poorer sexual health outcomes and related future ill-health. Increasing inequalities as services are harder to access for those who need them most and are likely to experience health inequalities.	Work with Public Health, Primary Care and Community Nursing to explore options to increase service sustainability.