Recommendation 1: The Committee would recommend that the final consultation documents are circulated to the Committee to note and the results are presented back in the Autumn ahead of implementation.

This recommendation has been completed and final consultation documents were circulated.

Recommendation 2: The Committee recommends that GP surgeries consider the translations services that they use and that they are appropriate for discussing personal sexual health issues.

NHS England, who are the responsible for commissioning primary care services and interpreting and translations services have recently undertaken a consultation and review for people who are deaf or do not have English as a first language. As a result of this a draft Principles Framework for Interpreting and Translations services has been published. This identifies what safe, high quality interpreting and translation service in primary health care should be and offers advice to primary care providers, commissioners, service providers and agencies, patients and carers on how to identify good practice. This guidance includes new standards for providers of interpreting and translation services which will ensure they are able to sensitively and appropriately support their patients in discussing sensitive health issues including sexual health issues. The Framework explicitly states that patients should always be offered a registered interpreter and that the use of family, friends or unqualified interpreters is strongly discouraged in national and international guidance and is poor practice.

Recommendation 3: The Committee recommends that the Council consider the provision of free English classes to help grow understanding and confidence amongst residents.

Southwark adult learning service provides courses in the basic skills of English language, literacy and English for Speakers of Other Languages. These courses are subsidised by the Skills Funding Agency (SFA) and are provided free to of charge to residents who meet the SFA eligibility criteria. 500 residents accessed this in 2015-16.

Provision is available between pre-entry (introductory level, assumes no related prior knowledge or skills) and a notional level 2. Learners benefit from courses taught at the main site in Peckham and at various community venues across the borough. English language and literacy support is also provided through Family Learning courses. Parents and children attend and learn together. These are delivered from the main site and from Children's Centres and Southwark schools. Families benefit from opportunities for parents to improve their own literacy, numeracy and language skills and contribute to their children's education.

Learners develop good listening, speaking and reading and writing skills and they become more confident communicators in the English language. Learners also benefit from developing the knowledge and skills to manage every day life activities including consultations with their GP*, bank staff and job centre advisors. Learners develop good intonation and pronunciation of everyday English. Learners report increases in personal confidence and a sense of belonging to their local community. The overall standards of learners' work are good.

Southwark adult learning service has increased the amount of evening provision in recent years. More learners now benefit from twilight and evening provision and courses delivered in the community.

The provision includes a good mix of accredited courses (these bear nationally recognised qualifications) and in-house courses. The provision continues to be consistently judged good by Ofsted (Office for Standards in Education, the regulator for public funded provision) and City and Guilds (our chosen awarding body).

Arrangements for advice and guidance on progression and learning opportunities are good. Learners progress well from these basic skills programmes to vocational courses. This includes moving on to teaching assistants and childcare courses.

*Ref: NICE Guidelines: Patient experience in adult NHS services: improving the experience of care for people using adult NHS services -Clinical guideline (CG138); 1.5 Enabling patients to actively participate in their care

Recommendation 4: The Committee believes that integrating public health into the Voluntary Sector Strategy is an interesting and innovative approach to tackling the issue of those who do not currently access health services in the Borough. We would recommend that this approach is taken in the development of the Voluntary Sector Strategy.

The new Southwark VCS Strategy, Common Purpose Common Cause, was launched in November 2016 and was co-produced by Southwark voluntary sector groups, Southwark Council and Southwark Clinical Commissioning Group. The new strategy has a focus on health improvement for example, the development of 'preventive places' as 'community assets' and the co-location of services and opportunities, including health promotion, to improve access to services and outcomes for residents. The strategy also aims to support local communities to be 'more resilient, connected and more resourceful' and intends to support the development of community connectors or navigators to help do this and to also help sign post to services.

Recommendation 5: The Committee recommends that the Clinical Commissioning Group, hospitals and the Council should work together to ensure a variety of multi-lingual information sources are available throughout the Borough.

A variety of multi-lingual information sources are provided throughout the borough. Health Watch and local patient groups feedback on accessibility of information.

Recommendation 6: The Committee recommends that council and GP services should look to signpost young people to NHS websites and SH24 where information will be authoritative and easy to access.

Southwark is currently re-commissioning the young people's sexual health services and as part of this will include consultations with young people about accessing sexual health information, building on the work undertaken by Southwark Health Watch during the summer of 2016.

Recommendation 7: The Committee recommends that the Cabinet Member work with local schools to encourage the promotion of SH24 as a quick, convenient and safe way for young people to access sexual health services.

SH24 is primarily commissioned for adults and young people over 16 and is service designed to release clinic capacity for people who need to be seen by a clinician, including young people. It is important that young people are seen by a clinician because their age may make them more vulnerable to poor sexual health and for any safeguarding needs to be identified. Young people under the age of 16 must be assessed to be competent to consent to treatment and in relation to sexual and reproductive health services must satisfy several guidelines (Fraser guidelines), before clinician can proceed with treatment. This has yet to be tested through online services and would not currently meet safeguarding and legal criteria.

Southwark currently has two dedicated young people's services, Brook and Wise Up to Sexual Health provided through Guy's and St Thomas' Trust. In addition to these, both sexual health services provided at Kings College Hospital and Guy's and St Thomas' Trust are experienced in seeing young people and will triage young people to been seen quickly.

Southwark Health Watch recently undertook a consultation with local young people on sexual health and we are using the outcomes of this to feed into the future direction of young people's sexual health service provision.

Recommendation 8: The Committee also recommends that the Cabinet Member work with local schools to encourage them to focus the sexual health concerns of a variety of sexualities, in particular men who sleep with men (MSM) and chem-sex which are areas of growing concern.

Chem-sex is a specific form of drug use to facilitate and enhance sex between men and it is associated with increased risk of HIV and other STIs and poor mental and physical health. The Chem-Sex Study commissioned by Lambeth, Southwark and Lewisham showed that it was associated with an older age group (average age 36, range 21-53 years).

Thus while 'chem-sex' is a specific form of drug use amongst men who have sex with men, there are strong associations between substance misuse (including alcohol) and risky sexual behaviour amongst young people of all sexualities. In response to this, we are currently re-commissioning the young people's sexual health services to provide an integrated substance misuse and sexual health services for young people engaging in risky behaviours.

The Southwark Healthy Schools Programme supports schools to develop a comprehensive programme of personal, social and health education including sex and relationship education. This year, through the joint Council and CCG Commissioning Group we will review the health offer provided to schools and with a particular focus on reducing risky behaviours amongst adolescents.

Recommendation 9: The Committee recommends that officers leading the sexual health strategy take forward the idea of a national government-funded sexual health advice service as part of the London-wide strategy development around sexual health.

Public Health England provides a National Sexual Health Helpline which is open 9a.m. to 8p.m. every weekday and 11 a.m. to 4p.m. at weekends. Sexual health advice is also available on the NHS Choices website, which also includes information and advice on sexual and reproductive health.

Recommendation 10: The Committee would also recommend that the Cabinet member raises this issue with Public Health England to see where national funding may be able to be accessed.

See response to recommendation 9.

Recommendation 11: The Committee looks forward to further outcomes from the RISE partnership and would welcome an update as the programme continues.

Public Health and the sexual health commissioners will produce a report on the RISE Partnership in spring 2017 and circulate to the committee.

Recommendation 12: The Committee would recommend that medical services and professionals should begin to talk about 'late diagnosis' as any non-diagnosis, and encourage efforts to introduce opt-out testing at A&Es.

Reducing the number of people presenting to care at a late stage of HIV infection is a key public health priority and a key priority within the Lambeth, Southwark and Lewisham Sexual Health Strategy and action focuses on:

• Increasing access to testing – via local and national online sexual health services, through A&Es, primary care and in community settings.

- Reducing stigma via the RISE partnership and through the London HIV prevention programme.
- Training health professionals Southwark CCG have launched a new campaign for GPs, which included a half day protected learning time session, to increase awareness of HIV and improving knowledge and competency around testing.

As of July 2015 Guy's and St Thomas' Hospital included HIV in routine blood tests for people presenting to Accident and Emergency and in May 2016 Kings College London also included HIV in routine blood requests from Accident and Emergency.

A common clinical definition of late HIV diagnosis enables national and international surveillance and comparison of HIV identification. There are currently two internationally agreed definitions:

- Late diagnosis as persons presenting for care with a CD4 count below 350 cells/mL
- Very late diagnosis as persons presenting for care with a CD4 count below 200 cells/mL

These two definitions are used by Public Health England to monitor borough's late HIV diagnosis.