

St Helens Council

Children & Young People's Services Overview & Scrutiny Panel

Teenage Sexual Health Services

16 April 2018

1. Background

- 1.1 At the request of the Portfolio Holder for Public Health, Members of the Children & Young People's Services Overview and Scrutiny Panel agreed to undertake a light touch review of Teenage Sexual Health Services in the borough. Whilst no concerns had been raised, members agreed to look at the current service provision and make any suggested recommendations as to how the service could be improved.
- 1.2 A small member task group was formed Councillors Nova Charlton, Lynn Glover, Keith Roberts, Richard McCauley and Innes Arnold. Task Group members met with Helen Jones, Team Manager Young People's Healthy Living Services, Gary Barker, Jenny Owen and Jane Marshall from St Helens and Knowsley Teaching Hospital Trust Sexual Health Improvement to obtain background knowledge of the service and receive an update on the current provision available to young people. The task group also visited the Millenium Centre where the Teen Advice Zone (TAZ) was based.

2. Findings

- 2.1 National Context:
- 2.2 Improving the health and well- being of young people remains a key focus of Public Health England and the Association for Young People's Health and the recently launched framework for public health- "Improving Young People's Health and wellbeing," provides clear principles to help shape thinking from service providers, commissioners and educational establishments.

"The age period of 10-24 years of age is an exciting one. It is also period of increased risks, which, if left unchecked, can worsen in adulthood with life-long consequences."
- 2.3 The framework clearly places relationships at the centre of young people's health and wellbeing and by empowering young people to develop healthy consenting sexual relationships will support the ongoing agenda to reduce the number of under 18 conceptions.
- 2.4 Reducing under 18 conceptions remains a priority due to England's under 18 conception rates remaining higher than other European countries, with huge variances across England. Most under 18 conceptions are unintended and around half lead to an abortion. Where young women choose to go ahead with the pregnancy, although it is difficult to quantify the exact extent to which teenage pregnancy exacerbates existing problems, they are at greater risk of experiencing a range of poor outcomes.

For example:

- 20% of teenage parents are likely to have no qualifications at the age of 30
- Teenage mothers have three times the rate of post-natal depression and a higher risk of poor mental health for up to three years after the birth
- Children of teenage mothers have a 63% increased risk of being born in poverty and are more likely to have accidents and behavioural problems
- Most teenage pregnancies are unplanned and over half end in abortion
- Rates of Chlamydia and gonorrhoea are highest in women aged 16-19 and men aged 20-24

2.5 Teenage conceptions remain an important issue in St. Helens, and the local rate, (3 year average of 28.7 per 1,000 population) is higher than the England and North West averages (20.8 and 24.5 per 1,000 respectively). However, over recent years, teenage conceptions in St. Helens have fallen at a faster rate than both national and regional values (the rate for St Helens in 2010-12 was 45.9).

2.6 Sexual Health Support for Young People

2.7 A range of services are available to support young people to make healthier and safer choices when it comes to their sexual health. The Teen Advice Zone (TAZ) Outreach service (managed through St Helens Council) offers a range of services to young people, both in clinics and by engaging within local community settings

The team consists of:

- 1 FT Team Manager (also the YPDAAT manager)
- 1 FT Senior Practitioner (also the YPDAAT senior practitioner)
- 4 FT TAZ Outreach worker

2.8 The team operate 52 weeks of the year, apart from public bank holidays (delivery in school and FE settings takes place over 39 weeks per year.) Outside of office working hours' young people are advised of the pharmacy service, walk in centre for contraceptive and sexual health advice and any safeguarding concerns are directed to CYPS out of hours' system and the Police, as required.

2.9 TAZ works hard to provide the following:

- universal group work to young people aged 13-18 years
- Targeted group work to young people aged 13-18 years
- One to one referrals for young people identified at risk, pregnancy choices and or termination support.
- Clinical sessions in both a sexual health service for young people, school and supported housing projects, from aged 14-18 years.
- Equipping professionals in each local agency working with vulnerable young people appropriate and up to date training on SRE/sexual health/risk taking/alcohol, CSE, Domestic Abuse, the law, on-line safety, pornography and substance misuse.

2.10 In addition, the TAZ Outreach team delivers a variety of training and education opportunities and sessions tailored to the needs of professionals, parents, carers, children & young people.

For children & young people:

- Healthy Body, Healthy Mind (group work)
- Pregnant and unsure what to do (one to one)
- Vulnerable/Risk-taking/Planning Pregnancy (one to one)
- Develop a team of trained young people to support the assessment, moderation and validation of Young People Friendly services

For parents:

- Top tip for parents' session, also delivered jointly with YPDAAT
- One to one support with their child/ teenager
- Advice, information and guidance via telephone or in person if required.

For professionals:

- Sex, drugs and risk control training
- Bespoke training, including Young People Sex and the Law, Top Tips for talking to teenagers, Young People and Emergency Hormonal contraception, Young People and Domestic Abuse, CSE briefing and Young People and Pornography.
- Supporting PSHE leads in schools to deliver effective programmes of Relationship and Sex Education (RSE) this includes policy and curriculum development
- Supporting schools to continue their Healthy Schools Enhancement journey
- Supporting health services to achieve the Young People Friendly Award

2.11 The TAZ Clinic is a discreet one stop shop for young people to access a wide range of support services. The clinic operates 6 days per week from the St Helens Millenium Centre. The Task Group visited the Clinic out of hours and found the service an excellent provision. This includes:

- Contraception advice and contraception services
- Emergency Hormonal Contraception (EHC)
- Pregnancy Testing
- Referral for Termination of Pregnancy
- STI screening and testing
- Condoms and C-card registration
- General sexual health and relationships advice
- Clinic services are provided by TAZ Outreach worker, nurses/doctors from Contraception and Sexual Health (CASH) services, clinical support from Genito-Urinary Medicine (GUM) services.

2.12 In the previous quarter, TAZ engaged with Cowley High School over the course of a term and provided a drop-in service to over 300 pupils. Significantly, following several engagement opportunities, the service is now providing drop in sessions within

several faith-led high schools which has been traditionally a difficult area to have a presence.

- 2.13 St Helens C-card is a scheme that enables young people to access free condoms from a variety of venues (such as children's centres, health centres, hospital, schools, pharmacies) across St Helens in a confidential and anonymous manner from trained staff who raise awareness on how to reduce risk of sexually transmitted infection and/or pregnancy.
- 2.14 In addition to this, several services also provide sexual health support to young people:
- The School Nursing Service operate Clinic in a Box, a confidential drop in for young people within a school setting. Young people can access EHC, STI screening, pregnancy testing and C-card.
 - The C-Card programme is managed through the CASH Health Improvement Team. The team have responsibility for training relevant youth services across the borough to enable them to provide C-Card and access to information about sexual health issues.
 - Young people who are Lesbian, Gay, Bisexual, Transsexual or Questioning (LGBTQ) can access support through the "Over the Rainbow Group". The group meets monthly and provides social and emotional support to young people. Young people use this group to meet new friends in a safe space, undertake workshops and receive information and advice around their health and wellbeing.
 - Support is also available digitally, via a website and email.

3. Conclusion

- 3.1 Overall, we were extremely impressed with the services provided by TAZ and the Trust's Sexual Health Improvement Team. Those working in this service were dedicated professionals who went above and beyond their duties to ensure that young people receive the best service/advice available. We were pleased to hear that Commissioners are going to work with TAZ and St Helens and Knowsley Teaching Hospitals Trust Sexual Health Improvement to develop a joint 12-month plan with respect to education and raising awareness of positive sexual health. The education & messages conveyed to young people will include awareness of STI's and how to reduce their risk.
- 3.2 Due in part to a negative perception of sexual education or a fear that it will encourage sexual activity, young people are sometimes denied education, information or health services that would otherwise have helped them to make capable, informed choices. Sex education in schools is a good opportunity to ensure that all appropriate sexual health messages are conveyed. We heard that engagement with Catholic schools in the borough had so far proved very difficult and more work was required in this area, particularly in relation to these young people being able to access holistic sexual health services. We were pleased to hear that the Government had recently announced that from 2019 Relationships and Sex Education (RSE) will be statutory for all education services. Consultation is currently underway on how pupils in England's schools are currently taught about

relationships, health and the wider world and personal, social, health and economic education (PSHE) lessons and are considering how we can improve these subjects.

- 3.3 Additionally, it is important to consider how we can engage with young people (boys) to do some targeted engagement and intervention to ensure this group, who may experience inequality and thus be at heightened risk, are better informed.
- 3.4 In 2017 (Jan – Dec) the TAZ Clinic saw 1437 patients and of these 15% (223) were boys; 85% of those who accessed the service were female (1214). An age breakdown is shown below:

Ages	No.
15 and below	362
16 – 18	899
19 – 24	176
Total	1437

- 3.5 The above data suggests that there is some work that can be done to make sure that young boys / men are aware of the service and the support available to them, and to ultimately increase male representation (if appropriate). To inform this approach, a series of engagement with the target audience, conducted in a sensitive way, may help.
- 3.6 The current Sexual Health Strategy 2014 – 2018 is now due to be updated / reviewed. We were pleased to hear that the approach of local services to supporting young people will be considered against identified need and appropriate actions taken to ensure equality to access of sexual health services regardless of gender and age.
- 3.7 We also heard that Pharmacies who supply emergency contraception do not record it on a universal system therefore the TAZ team/clinic is unable to track if young people are repeatedly using this service. This is particularly important in relation to identifying any possible CSE cases. Again, further work is required in this area.

4. Recommendations

1. That once published, government guidance on the teaching of relationships and sex education and PSHE be discussed with education providers with a view to improving engagement, particularly with Catholic schools, in the borough.
2. That pharmacies be encouraged to work with TAZ Outreach and the TAZ clinic to develop a system which enables better sharing of data.
3. That future work on the Sexual Health Strategy which will ensure equality of access to sexual health services regardless of gender and age is welcomed.
4. That work be done to make sure that young boys / men are aware of the service and the support available to them, and to ultimately increase male representation (if appropriate).