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Our Ref: PZR/SKS/pzr11oct2010
Your Ref:
11 October 2010

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Ms Louise Tyres
Scrutiny Manager
On behalf of the Scrutiny Commission for Health Issues
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Dear Louise

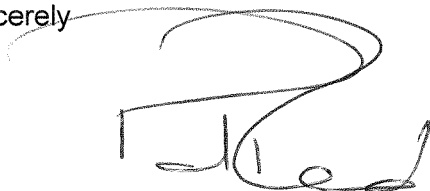
SCRUTINY COMMISSION FOR HEALTH ISSUES – PROVISION OF CONTRACEPTIVE AND SEXUAL HEALTH SERVICES

Thank you for your letter advising us of the outcome of the Scrutiny Commission to not support the NHS Peterborough decision to withdraw funding for the pharmacy based sexual health programme. I attach our responses to questions raised at the Scrutiny Commission.

As a result of the Scrutiny Commission decision, the programme is now under review with key stakeholders led by Cheryl McGuire (Public Health Specialist – Sexual Health) and Rita Bali, who represents the Local Pharmacy Committee (LPC). The review process is now almost complete and the conclusions of the review will be available by the next Scrutiny Commission. The review will provide recommendations to NHS Peterborough for the future delivery of the programme.

I assume this matter can be discussed at the next meeting of the Scrutiny Commission.

Yours sincerely



Dr Paul Zollinger-Read
Chief Executive

Enc

cc Denise Radley, Director of Adult Social Services
Sue Mitchell, Associate Director

NHS Peterborough response to Scrutiny Commission for Health Issues (held on 13 September 2010)

Response to questions raised by the Scrutiny Commission for Health to NHS Peterborough with regard to agenda item 2.1 - Decision to withdraw funding for the pharmacy based sexual health programme.

What are Sexual Health Services doing for ESOL patients?

The Contraceptive and Sexual Health (CaSH) service provides education and information to young people where English is their second language. Staff within other young people's services direct as appropriate onto CaSH services using Language Line. The Outreach programme has delivered sexual health sessions to groups in the Millfield, Gladstone and at Peterborough Regional College (PRC), targeting those young people who have English as a second language. The Sexual Health Outreach programme within the Regional College provides information and support for contraception, chlamydia screening and pregnancy testing as well as signposting onto relevant services. The CaSH service has good links with staff working with ESOL students within PRC and, when working with young people in one to one consultations Language Line would be utilised. The same process is embedded within the Department of Sexual Health whereby Language Line supports clinicians to support patients to receive accurate information in their native language.

All C-card (free condom scheme) information is written in three languages; Polish, Portuguese and Urdu, which reflects three of the largest ESOL populations in Peterborough. However, it also provides details in other languages of whom to contact for further information.

What access is there for young people to Sexual Health services who live outside the City Centre?

The Outreach delivery from the CaSH service delivers HYPAs (Health and Young People Advice) in 7 secondary schools. HYPAs are a multi agency 'drop-in' for young people to access a range of support provided by school nurses, youth workers, Drinksense and Bridgegate. The clinics have been led by the CaSH service and provide sexual health support around contraception, chlamydia screening, pregnancy testing as well as providing information/advice on other risk taking behaviour which can be linked to sexual health. They are based in Kings School; Ormiston Bushfield Academy, Thomas Deacon Academy, Stanground College, Orton Longueville School, The Voyager School and Ken Stimpson Community College. The catchment of each school can be vast and captures young people from a wide area across Peterborough. All schools have access to a school nurse who can provide Sexual Health support to young people across the school population.

The Contraceptive and Sexual Health service also promotes our clinics to some schools in Cambridgeshire and to any non-Peterborough residents attending Peterborough Regional College, who can access the clinic we provide twice per week on site. As the CaSH service is now co-located with and aligned to the Sexual Assault Referral Centre (SARC), it also promotes an integrated pathway across Peterborough and Cambridgeshire to sexual health provision.

The Youth Service also promotes our services and also offer C-card condoms in all areas of the City including the more rural areas of Peterborough. Emergency Hormonal Contraception (EHC) is accessible through CaSH clinics, HYPAs and also the Walk In Centre as well as GP surgeries. The CaSH young people team also try hard to meet the individual requirements of schools where a young person presents who urgently needs

EHC. This has once again become more widely used following the decision to withdraw funding for the pharmacy based sexual health programme.

We are currently training up more GPs and Health Practitioners to offer Long Acting Reversible Contraception (LARC) which young people can access through their local GP. This is a Department of Health led initiative which has provided some funding to roll out a training programme as the evidence is that LARC is an effective way to prevent unwanted pregnancies. The CaSH service has a LARC Clinical Lead in place to support local GPs and Health Practitioners to access the training and accreditation process locally.

In 2008 the PCT recruited a Contraceptive Nurse who has a specific remit to reduce the number of second teenage pregnancies. The post holder works with a large caseload of young women across Peterborough providing 1:1 support, advice around LARC (as well as supporting compliance), including signposting to the full range of sexual health support available. This nurse works across all boundaries in Peterborough.

What is the EHC uptake across Peterborough?

The following data relate to the 2009/10 financial year:

Pharmacy based Sexual Health Programme	256 (<25 years old only)
Walk in Centre	720 (<i>approximation - all ages</i>)
GP surgeries	931 (<i>all ages</i>)
CaSH service	105
GUM	data unavailable but small numbers only

What is the cost of a Teenage pregnancy?

The average actual cost of an unintended teenage pregnancy is £1.050 (Bayer HealthCare report – Spring 2008). It was estimated that by investing in intrauterine system contraception (IUS or the 'coil') the total saving to NHS England in 2006 was approximately £86m. It was also estimated that by investing in EHC a saving of approximately £513m could be made.

However, the overall costs are much more than just financial. The social cost to young people who have an unintended pregnancy is huge. Evidence indicates the risk of teenage pregnancy is linked to level of deprivation and reduced life chances. It has a cyclical nature, passing from generation to generation. It prevents children and young people meeting the Every Child Matters outcomes. Additionally there is an increased risk of premature and low birth weight, a 60% higher infant mortality rate, increased risk of hospitalisation for accidental injuries, developmental delays and poor nutrition. Other factors to consider are:

- 63% increased risk of being born into poverty
- 3 x more likely to smoke throughout their pregnancy
- 50% less likely to breastfeed
- 3 x the rate of post-natal depression of older mothers
- As adults, 22% more likely to be living in poverty, unemployed or living with a partner and 20% more likely to have no qualifications

For further information/queries please contact ; cheryl.mcguire@peterboroughpct.nhs.uk