

SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No. 7
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Report of the Executive Director of Public Health

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PROVISION OF CONTRACEPTIVE AND SEXUAL HEALTH SERVICES FOR YOUNG PEOPLE

1. PURPOSE

- 1.1 To inform the Commission of the comprehensive review of contraceptive and sexual health services for young people due to increasing financial pressures faced by service providers as demand for services increases. This review will take account of the recently completed review of the Pharmacy-based Sexual Health Service and the review of the decision to bring this pilot project to an end. The review of this decision was requested by the Commission.

2. RECOMMENDATIONS

- 2.1 To note the current review underway of all contraceptive and sexual health services for young people which will also include the results from the pharmacy-based scheme review; and that a further report will be presented to the Commission later in the year.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY AND LOCAL AREA AGREEMENT

- 3.1 Contraceptive and sexual health services, including the Pharmacy-based Sexual Health Service are linked to NI 112: reducing unintended pregnancies within the under 18 age group, a national and Local Area Agreement Indicator within the priority area of creating opportunities and tackling inequalities. These services also contribute to the delivery of the national and local VSI 2010/11 Chlamydia Screening target to screen 35% of the 15 – 25 year old population during 2010/2011.

4. BACKGROUND

- 4.1 The Pharmacy based Sexual Health Service was funded initially by the East of England Strategic Health Authority (SHA) in 2008/9 and 2009/10 as part of a wider successful bid to test innovative new schemes to increase access to contraceptive service for young people. The project ended in August 2010. The main drive behind the funding was to contribute to the Teenage Pregnancy Strategy to reduce <18 conceptions.
- 4.2 Following an evaluation looking at take-up and cost, in the context of NHSP's financial constraints, a decision was made to withdraw the scheme from August 2009. At the Commission's meeting in October 2010, this withdrawal of service was discussed. The Commission felt unable to approve that decision and requested NHSP to review and reconsider its decision.
- 4.3 This scheme was part of a much wider strategy to modernise and improve services for young people in Peterborough, leading to the development of the Rivergate Centre as a hub for young people's contraceptive and sexual health services, with training and support for the development of contraceptive services in primary care and targeted at young people at most risk. Since the Health Scrutiny Commission requested a review of the decision to end this scheme, further funding issues have emerged within other services as efforts to increase

capacity and access to contraceptive services for young people have been successfully implemented.

5. KEY ISSUES

- 5.1 Access to contraceptive services through primary care has increased as more GPs and practice nurses have been trained to fit long-acting reversible contraception. This is in line with NICE guidance concerning the reduction in teenage pregnancies and improving sexual health. The training continues and the increased capacity in the system requires funding.
- 5.2 Take-up of long acting reversible contraception (LARC) by young women via the Contraceptive and Sexual Health Service (CaSH) has also increased significantly since the service moved to the Rivergate Centre. CaSH is the training hub for family planning and LARC training for clinicians locally. This service has notified NHSP that without any additional funding it cannot meet the increased demand for LARC – thus restricting the increasingly popular service for young women. Take-up by 15 to 24 year-olds of Chlamydia screening has increased, although lack of funding for this programme is limiting the number of screens and therefore ability to meet the 2010/2011 target is significantly reduced.
- 5.3 A comprehensive review of all contraceptive and sexual health services for young people has been requested by the Chief Executive to ensure the limited resources available are appropriately targeted to deliver high quality and cost effective services. The results of the review of the Pharmacy-based Sexual Health Service will be considered alongside other competing priorities that have emerged.

6. IMPLICATIONS

- 6.1 As there is limited funding, the implications of decisions reached in this review may impact on some services, however the result will ensure sustainable accessible services for young people with a clear objective of improving their sexual health and reducing teenage conceptions.

7. CONSULTATION

- 7.1 Key Stakeholders taking part in the review of the pharmacy based service including NHSP's Chief Pharmacist, Ron Smith, Rita Bali, LPC lead, Cheryl McGuire (Commissioner for Sexual Health), Kay Elmy, (Manager CaSH/Oasis), Lorraine Brooks (Sexual Health Outreach lead – C-Card), Camilla Sewell (Chlamydia Screening Co-ordinator), Katie Good (EHC Co-ordinator for the pilot programme), Pam Setterfield (lead for teenage pregnancy within PCC). This review has also been informed by an NHSP led Young Persons Consultation on Sexual Health (December 2008). These individuals will be included in the wider review, alongside the Young People's Forum and other relevant groups.

9. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

- 9.1 Letter from Dr P Zollinger-Read, Chief Executive NHS Peterborough, and answers to questions raised at the last Scrutiny meeting