

Taking a strategic approach to sexual health service development in further education



January 2010

A briefing paper for sexual health service commissioners, FE senior leaders and professionals working in FE-based sexual health services

Introduction

Rationale for on-site sexual health services in FE

Further education (FE) and sixth form colleges are now recognised as key settings for increasing young people's access to sexual health services. In the last few years on-site services have developed rapidly, backed up by an injection of £3.5m from the Department of Health for 2008–11 to specifically increase contraceptive services in FE.

There is a strong rationale for further education providers, local authorities and primary care trusts (PCTs) to work together to invest in on-site service provision in colleges. Funding for further education provision is currently being transferred from the LSC to local authorities and this creates a clearer responsibility for local authorities to work with partners to achieve the Every Child Matters outcomes for young people aged 16–19 years (DCSF 2008).

Locating services in places where children and young people go is central to the thinking of the Children's Plan (DCSF 2007), which recognises that 'by locating services under one roof in the places that people visit frequently, they are more likely to find the help they need'. This position is confirmed by the Child Health Strategy which urges local authorities and PCTs to work together on joint needs assessments and to jointly commission contraception and sexual health services in school and college settings (DCSF and DH 2009).

Further education and sixth form colleges are ideal settings for providing health care, since many young people go there every day and the environment has the advantage of being young-people oriented and having communication systems in place to promote service use. In fact, young men are more likely to visit a school- or college-based service for a chlamydia test than any other venue (HPA 2007).

Cost-effectiveness

The benefits of drop-in services in FE sites is recognised by college leaders and public health commissioners alike. In some colleges, the initiative to set up services has been driven by concern over high drop-out rates from courses due to unplanned pregnancy. There are financial incentives for colleges when their learners achieve planned attainment and are retained.

For the health service, an estimated £11,000 is saved for every £1,000 spent on contraception. Ensuring that young people in the 16–19 age group can reach preventive health services easily is an essential public health investment and will

contribute to achieving local and national targets on teenage pregnancy and chlamydia screening.

Young people aged 16–19 are at a point of transition in their lives. FE colleges are key destinations for young people leaving school. The move to college prompts young people to form new friendships and relationships – and statistically we know that most young people will first have sex when aged 16 or over (Wellings and others 2001). Yet this age group also experiences poor sexual health outcomes, with 80 per cent of teenage conceptions (to under 18s) being to 16 and 17 year olds and, of these, approximately half being terminated (DCSF 2009), which suggests they were unwanted or unintended. Vulnerability to sexual exploitation is also high for young people aged 16 and 17, who may not see themselves as victims of sexual abuse (Home Office 2008).

Young people aged 16–24 are also a high-risk group for sexually transmitted infections (STIs), and account for nearly half of STIs diagnosed, despite making up only 12 per cent of the population (HPA 2009). Screening young people for chlamydia is one of the Department of Health's Vital Signs Indicators; the target is 25 per cent of the population aged 15–25 to be screened in 2009/10.

Existing provision

A survey carried out by the Sex Education Forum in 2008 found that 72 per cent of FE and sixth form colleges had set up on-site sexual health services. The survey found considerable variation in the level of services on offer, both between and within local authority areas. For example, in a local authority with three colleges, there might be a specialist sexual health service in one college, offering a wide range of contraceptive choices; a basic service in the second, offering condoms and chlamydia testing; and no services at all in the third.

These variations can be explained partly by the barriers to development identified by professionals working in and with colleges (SEF 2008), which included:

- college staff who were not trained or confident in sexual health
- religious objections
- funding, for example small colleges finding it hard to fund a full service
- difficulties in finding the right contacts.

There are indications that since the mapping survey carried out by the Sex Education Forum in 2008 the number of colleges providing services have grown.

Strategic approach

During 2009, the Sex Education Forum searched for local authority areas where service provision across several colleges was being coordinated, thus enabling a more strategic approach. Five areas taking a strategic approach were identified, namely Croydon; Gloucestershire; Leicestershire and Leicester City; Southampton; and Wigan.

Research was carried out in each area through interviews with key contacts. In each area, professionals spoke about the positive benefits of taking a strategic approach. These can be summarised as follows:

- It is cost effective to commission services as a group.
- Best practice can be shared.
- Training can be provided by one person across several colleges.
- Joint events and communication activities can be set up for PCTs and colleges.
- Students get consistency wherever they go.
- Specialist training and staff roles are viable as shared resources.
- Links can be made between sex and relationships education (SRE) and service provision in FE.

There are indications that, since the mapping survey carried out by the Sex Education Forum in 2008, the number of colleges providing services has grown. This Briefing describes those features of strategic approaches used in the five local authorities studied that have driven forward rapid service development and generated improvements in the quality of provision. Key themes highlighted in this Briefing are: motivation for strategic working; networking; increasing service provision; funding; participation of young people; training; evaluation and monitoring; and the future.

This document provides a summary of five case studies, which can be found in full in the Appendix and on the Sex Education Forum website (www.ncb.org.uk/sef).

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Motivation for strategic working

The reduction of teenage conception rates was the main motivation for developing sexual health service provision in FE colleges in the local authority areas studied. Some areas

already had good services in colleges and wanted these to be sustained, but in all areas the level of service provided in colleges within the local authority area varied. There was recognition that professionals could work together across organisations and settings to share practice, further develop provision and ensure that young people had equal access to services, no matter which college they attended.

In each of the five areas, the move to working more strategically was driven by a key professional with a health remit. These 'champions' were, variously, teenage pregnancy coordinators, a college nurse and a sexual health lead doctor.

In Southampton, the teenage pregnancy coordinator has a dual role and is employed by both the PCT and the local authority as the teenage pregnancy strategic lead and commissioner for sexual health services for the PCT. This dual role enables her to provide momentum and drive the development of a FE and sexual health network across the city.

Gloucestershire – the 'deep dive' report

A consultant was commissioned by the PCT to undertake in-depth research into each of the FE colleges in Gloucestershire to ascertain what was needed. The teenage pregnancy coordinator, in partnership with the lead doctor for contraception, subsequently hosted a meeting and invited representatives from each college to identify how money available to develop sexual health services in FE should be spent. The consultant ensured that they gathered the views of young people as well as professionals when exploring what services were needed.

This research extended to Gloucestershire's special college (for physically disabled students and students with learning disabilities). The outcome of the research fed into the plan for the strategic working of the partners. In addition to the motivation provided by the outcomes of this report, Gloucestershire had the benefit of a lead doctor for contraception. Her dedication to this work has been instrumental to the success of this project and she has taken the lead in developing partnerships and delivering services across the county.

Networking

Developing networks and building relationships across settings and disciplines has been key to establishing more strategic working practices. Links were made with teenage pregnancy coordinators, sexual health and college nurses, and student services managers in colleges and the PCT.

Wigan

The services were developed between Public Health (in the PCT), FE colleges in Wigan and college nurses. The strategic working has enabled the services to increase from employing one nurse based in Wigan and Leigh College, to employing three across four colleges – covering nine sites.

A specialist college sexual health nurse coordinates services across the PCT as well as running drop-in clinics, delivering tutorials and organising health promotion events. This work includes liaising with the teenage pregnancy coordinators and other young people's services, and providing drug and alcohol support and stopping smoking services.

The specialist college sexual health nurse meets with the assistant director of public health (her line manager) every half-term for an information-sharing session about the service. The colleges have joint termly healthy college meetings and each individual college also has an in-house meeting once a term. In addition, the specialist health nurse attends other local agency meetings to enable joint working.

Increasing service provision

In each of the case study areas, the level of service provision in colleges has increased since the Sex Education Forum carried out its service mapping exercise in 2008. Some of the colleges that are based on more than one site have also ensured that they have services on several sites. All five areas now have a level of on-site sexual health services in all their FE and sixth form colleges. In some of the colleges that already had on-site services there has been a significant increase in what they are able to deliver. For example, some colleges are now offering a wider range of contraception, including providing long-acting reversible contraception (LARC) on site.

Many of the sexual health services within the colleges do not sit in isolation. For example, in two of the areas researched, drug and alcohol services and sexual health services sit alongside each other to provide students with a holistic health and well-being service.

Croydon

Sexual health outreach services have been set up in all three Croydon colleges. These clinics are run by the young people's sexual health outreach nurse. These take place once a week for two to three hours. Young people tend to access this service on a drop-in basis, although appointments are also available. The following services are available in all colleges as part of the sexual health drop-ins:

- sexual health information, advice and support
- free condoms, femidoms and lubricant
- pregnancy testing
- referral for termination
- chlamydia testing and treatment
- emergency contraception
- hormonal contraception, including contraceptive pills and Depo-Provera injections
- advice on and referral to contraception services
- advice on STI screening at the genito-urinary medicine (GUM) clinic.

Funding

Funding for the development of these services has come from different sources. The Department of Health gave each strategic health authority (SHA) money to expand contraception services in FE. Both Southampton and Leicestershire made successful bids for this money from their SHA to develop their services. In contrast, Gloucestershire and Croydon services were developed using existing funding from sources such as Choosing Health, Public Health and NHS funding. Services in Wigan are jointly funded by the PCT, Teenage Pregnancy Service and Wigan and Leigh College.

Participation of young people

In all the areas studied, young people were involved in the development of the services. In one college the students were asked to comment on the service after it had been set up. It was noted that changes then had to be made to the service, whereas in other colleges, where young people were consulted in advance, service design was successful and did not need changing.

Southampton

The three Southampton colleges took part in a Want Respect? campaign, which involved peer-led sexual health promotion. Peer educators from each college were trained by an external organisation and ran events for students across each of the college campuses. Training was initially offered to only one college, but the network acknowledged that this should run across all three and funded the other two colleges to have a joint training session. A 'train the trainers' event for staff (both clinical and non-clinical) was also run, so that the programme could be sustained within the colleges without the need to bring in external trainers in the future.

Altogether 2,000 young people were reached through the campaign and it received a lot of media interest. The campaign ran in three colleges throughout 2008/2009 before Christmas and will run again in the lead-up to Valentine's Day 2010. Want Respect? is also being used as the brand to create student survival kits and the citywide promotion of college-based services.

Training

Training needs and opportunities varied across the locations studied. In some areas, all the services were delivered by sexual health specialists and no extra training needs were identified. In other areas, the specialists delivered further training to non-clinical staff so that they could enhance their skills and deliver basic services to further support young people in their colleges.

Leicester and Leicestershire

The network identified training needs by consulting with leads from each institution, and training events have been delivered to ensure that these are met. Training will be offered to workers in all FE colleges in Leicestershire and Leicester City who are delivering sexual health services. This will include training for tutors in order to support the delivery of SRE.

The local arrangement for the support of condom services is through the Community Safer Sex Projects, which train non-clinical staff, including college student support officers, to provide condoms and pregnancy tests and then offer ongoing support.

Evaluation and monitoring

There has been some level of central evaluation and monitoring of service delivery in all the areas studied. This ensures consistency in the type of data collected, making it comparable across several colleges. Having a central set of data also reduces the burden on colleges to design paperwork, collect and analyse data.

Southampton

Termly monitoring of service uptake is documented by each provider and supplied in their commissioning reviews on a quarterly basis. The information gathered will include the service user demographic, the precise services that have been accessed and the needs that the service users have identified.

Early evaluation of the project indicates that it has been a great success. Measurable indicators include the following:

- 60–70 young people have been seen weekly across the services.
- Chlamydia screening has increased from 5.9 to over 14 per cent.
- Quick and easy access to unplanned-pregnancy services (under 10 weeks) was maintained.
- The number of young people under 20 having terminations during the first six months of 2009/2010 is lower than in the previous year.

An annual evaluation is planned in the spring term of 2010, as services will have been running for a year. The purpose of this is to examine whether service location, hours and the model are still meeting the identified needs of the young people in each college.

Plans are in place for the colleges to self-assess against and fulfil the You're Welcome quality criteria. Cost effectiveness will be reviewed within the sexual health spend mapping, to be completed by the Sexual Health Strategy group in March 2010.

The future

In the five local authority areas studied, there have been clear benefits from taking a more strategic and coordinated approach to service commissioning and development.

- The availability of sexual health services for young people in FE has increased.
- The training and support needs of clinical and non-clinical workers have been addressed collaboratively.

- Young people have played an active role in service design and promotion.
- Data is being collected centrally that will create a bigger picture of service effectiveness across the local authority area.

Southampton

The network is beginning to take a broader health and well-being role and has begun to link in professionals from other disciplines, including Substance Misuse and CAMHS (Child and Adolescent Mental Health Services). Southampton is now developing work outside the city and has begun to link in with other local authorities within the region. It is anticipated that this will enable the network to develop over time in order to share good practice and maximise the sharing of skills and resources.

Recommendations

Based on findings from the research reported in this Briefing, the Sex Education Forum recommends the following actions.

► Provide strategic leadership

There must be strategic leadership to coordinate and provide resources for the development of a consistent level of sexual health services in FE across the local area. Coordination can be provided by a champion from within the PCT or local authority.

► Facilitate practice-sharing through professional networks

Communication between partners with an interest in the development of sexual health services in FE is vital. This can be achieved by establishing a practice-sharing network or steering group or by holding a stakeholder event for strategic partners at local or regional level. To ensure that holistic health services are available, links should extend to other relevant adolescent health and well-being partners, such as drug and alcohol services. Services must also be extended to the broader FE sector, including work-based learning providers.

► Have senior managers from FE providers represented in local decision-making forums

This would include the local teenage pregnancy partnership board, safeguarding board and Children's Trust partnership – so that they are in a position to inform commissioning of children's services and work in partnership to meet the Every Child Matters outcomes.

► Be committed to the participation of young people

Needs assessment, service design, and monitoring and evaluation of service-use must include the voice of young people in order for services to be relevant and meaningful.

Young people can be invited to visit services in other local colleges and then give feedback on ideas they want to try in their own college.

► Include SRE as part of the wider sexual health strategy in FE colleges

Young people aged 16 and above have stated that they would benefit from age-appropriate SRE in further education, so SRE should be included as part of a strategic approach. SRE provides a vital opportunity to promote services and is particularly important for vulnerable groups such as young people with learning disabilities and unaccompanied minors.

► Use monitoring and evaluation data to inform future strategic planning

Central collection of monitoring and evaluation data can be used to assess and demonstrate the cost-effectiveness of continued investment in service provision to partners in both education and health. Data can be used to identify which services seem to be 'working', and this data can be analysed to inform less successful services. Detailed information about service users can help in evaluating who is accessing services and identify whether there are barriers for specific groups of young people and how these can be removed.

► Take a strategic approach to commissioning training and resources

A centralised programme of sexual health training for practitioners working in colleges across the area is an efficient approach to workforce development and further fosters practice sharing. A cross-college approach to training could also extend to the training of peer educators. Professionals in particular colleges could agree to undertake training in a specialist subject area, for example in supporting Looked After Young People, and then share knowledge across colleges. A similar approach can be taken to resource development, for example developing service promotional materials collaboratively by running a competition across colleges to design posters and share costs for printing.

Conclusions

The sustainability of service provision will be crucial. The new funding for contraceptive services in FE from the Department of Health appears to have been an important motivator for change and more strategic approaches. Areas now must start planning how services can be sustained. As services become embedded in colleges, it will be important to demonstrate the benefits to college leaders and service commissioners. In some areas, joint-funding models are working well – with the college and PCT sharing salary costs for clinical staff. This model is likely to be increasingly important.

Resources

Sex Education Forum

Case studies

The Sex Education Forum website contains case studies about sexual health services and SRE in schools and further education colleges. For the purpose of this document, the Sex Education Forum researched five areas that are working in a strategic way to deliver sexual health services in further education colleges. The information gathered is documented in individual case studies which are reproduced in the Appendix of this Briefing and also in the Practice section of the Sex Education Forum website: www.ncb.org.uk/sef

Network

The Sex Education Forum runs free email networks for professionals. Members benefit from regular email bulletins with the latest policy, resources, training and news; and from a network exchange facility for posting questions and sharing innovative practice. Over 500 professionals, including school and college nurses, youth workers, healthy schools and teenage pregnancy coordinators, are already sharing their expertise through these networks.

Department of Health

The Healthy FE initiative, developed by the Department of Health, provides a framework to look systematically at the health and well-being needs of students, and to use opportunities in the curriculum and wider college environment to promote health education and service access. For more information, including a self-assessment tool visit the Programmes section of the Learning and Skills Improvement Service Excellence Gateway at: www.excellencegateway.org.uk

The Department of Health have produced quality criteria for young-people friendly health services, entitled 'You're Welcome', which provides a quality assurance tool for services in all settings. More information is available from the Department of Health website: www.dh.gov.uk

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Appendix: The case studies

Gloucestershire

Material for this case study contributed by Liam Kernan, SRE Lead, Gloucestershire and Norman Williams, Assistant Principal, Cirencester College.

The aim of the project

The aim of the project is to ensure equal opportunity of access to sexual health services for all young people attending further education facilities in Gloucestershire.

What happened?

The project was led by the health service, with the lead contraception doctor for young people at the forefront of the development of the service. The idea was taken to the teenage pregnancy implementation group and then went to the board. The doctor presented a written bid and this was accepted.

A consultant was approached to undertake in-depth research into each of the colleges to ascertain what was needed. The lead partners subsequently hosted a meeting for, and invited representatives from, each college. They were informed that there was money available to develop sexual health services within FE settings and that the project leads wanted to know how providers thought this money should be spent.

Initially it was anticipated that one nurse would work in all the colleges. However, colleges were at different starting points and had different levels of service provision. It became clear that colleges would be able to provide a more needs-led service if money was divided up between them so that it could be allocated to where there were gaps in the service. As a consequence, all colleges involved in the project now provide an equal level of service.

Who was involved?

The lead contraception doctor for young people initiated the project. This was developed in partnership with the SRE lead from the Teenage Pregnancy Board and the sexual health lead for the Youth Service. The service was developed for five FE colleges and it is anticipated that a further two will be involved in due course.

The project involved mainstream FE colleges and one special college (for physically disabled students and students with learning disabilities). Services also linked in with sixth forms attached to schools through the 'extended school nurses' facility.

Networking and support

The lead doctor worked with each individual college, offering support and training in developing and sustaining services. Workers within colleges are beginning to work across sites and several colleges. Through coordinating condom

distribution services, the sexual health lead for the Youth Service has also contributed to the development of professional networking.

What services are provided?

The project has aimed to ensure that there are sexual health services within each college appropriate to the needs of the students. Every college provides a contraception and sexual health nurse who is able to provide the following services: chlamydia testing and signposting to GUM; condom provision; pregnancy testing; provision of emergency hormonal contraception; and first-time issuing: the starting of progestogen-only pills, combined oral contraceptive pills and Depo-Provera injections (LARC). One nurse is also able to fit Implanon implants (LARC) and another has almost completed her training in this. If a service is not available on site, then the provider has the capacity to refer the young person to external services.

Resources

A DVD has been designed which outlines sexual health services in Gloucestershire and the experiences that young people may have when they attend these services. This will be sent to all schools and colleges in Gloucestershire to be used within SRE.

A CD-ROM covering basic SRE topics will be available for young people seeking asylum. This will be available in 11 different languages and will be provided to all services within Gloucestershire free of charge.

Funding implications

Initially the money was made available by the Teenage Pregnancy Board. However, although this money was able to contribute to the setting up and development of services, it is not unlimited. In order for the services to be sustained, colleges will have to consider the long-term socio-economic benefits and explore the viability of contributing to funding. This is happening in some colleges and it is clear that a committed team is essential for services and funding to be sustained. NHS Gloucestershire has now agreed funding for next year to improve access to contraceptive services in all colleges. This means that it will be possible to extend services to ensure that all colleges in Gloucestershire provide a full sexual health service for students.

Training

The doctor provided training for school nurses in emergency hormonal contraception. This training is about preparing nurses with skills for communicating with young people. This is balanced with developing the skills to get a good sexual history in order to make the right recommendations. This is a rigorous course that culminates in a session working with the young people. Gloucestershire also provides multi-agency Relationship and Sex Education Training (ReSet) and Stif Training (Sexually

Transmitted Infections Foundation course) which is a basic course on STIs and sexual history taking for nurses and doctors.

The ReSet course is coordinated by the Youth Service sexual health worker and is always delivered by workers from different disciplines (both clinical and non-clinical). The training is available to all those working with young people and participants tend to come from a variety of disciplines. Gloucestershire also offers courses on specific subjects such as: Faith and Community groups, Termination and Choices, and Disability.

Young people's involvement

Young people informally stated that they wanted services developed and have actively accessed all services where there were previously none available. Young people were interviewed about service requirements as part of the in-depth study undertaken.

Monitoring and evaluating the service

All nurses document who accesses the service and what services they required. This information is fed back to the lead doctor who collates the information and in turn feeds back to the public health manager for sexual health services.

College viewpoint

Norman Williams, assistant principal at Cirencester College, highlighted the benefits of on-site sexual health services:

The health support within colleges often tends to be underdeveloped. Historically, schools always have had nurses but we don't. When the opportunity arose to have a nurse in the college we said yes instantly as we knew it would be a good service. Often the staff who work in the college feel that they can't offer specialised health support. To have these services on hand is a valuable support service for the staff, as well as the students. Students now feel that there is a range of support on offer, not just tutorials and education. We organised for tutor groups to attend talks on sexual health and this worked really well.

Recently, I attended a child protection planning meeting to explore the needs of one of our learners. I was able to suggest that the on-site sexual health services could be part of her support and protection plan.

If the services were removed from the college there would be a risk of long-term health issues for some of the learners in the college. Cirencester College has a large geographical catchment area covering large rural areas. For some learners this is the ideal location for them to access services.

Southampton City

Material for this case study contributed by Charlotte Bemand, Teenage Pregnancy Lead, Southampton.

The aim of the project

To sustain college-based specialist sexual health services within a network of linked health provision from college staff and other multi-agency partners, based on the foundation of young people's participation.

Background

Southampton initially offered a successful outreach sexual health service for young people. Through an exploration of the conception and STI rates for 16–19 year olds, it was identified that further services needed to be developed. Individual colleges also recognised the need for service development through the situations that they were dealing with on a daily basis. The existing service was successful due to strong partnership links between individuals in voluntary and statutory organisations and it was assessed that this was the basis on which to develop further services.

Service development

Built on the positive relationships between further education college staff and sexual health staff, a sexual health partnership was formed. Initially this was located in one college but, after one term, the sexual health manager identified that there needed to be a consistent approach across all colleges within the city. In order for this to take place, a partnership was established between the specialist sexual health nurses, No Limits (a voluntary sector youth organisation) and all colleges in Southampton City. This is now known as the College Sexual Health Network.

The College Sexual Health Network

The College Sexual Health Network comprises specialist sexual health nurses, a chlamydia screening lead, teenage pregnancy lead, sexual health services manager, No Limits staff, health promotion services, student support lead and a youth support worker. Members of the network meet termly. Meetings are hosted by colleges on a rolling rota and the host college provides the chair for the meeting.

In addition to termly meetings, individual members also have contact throughout the term when necessary.

Agenda items have included feedback on sexual health drop-in services; young people's feedback; developing service level agreements and a confidentiality agreement; and planning for events. Members also have the opportunity to discuss and plan how to meet the needs of students for the following term.

The Network is essentially run as a partnership with no organisation or individual taking the lead. However,

momentum and drive has been initiated by the teenage pregnancy coordinator, who has a dual role in Southampton and is employed by both the PCT and local authority as the teenage pregnancy strategic lead and commissioner for sexual health services for the PCT. The network encompasses all three FE colleges in Southampton.

Direct services offered

No Limits and the specialist sexual health nurses deliver a weekly sexual health drop-in service at each college. This includes: contraception (including LARCS), emergency contraception, referral for unplanned pregnancy, pregnancy testing, chlamydia screening and treatment. Contraception advice and the provision of LARCs are offered by the specialist sexual health nurse. In addition to chlamydia screening available within the drop-in service, there have been chlamydia screening events taking place in each college. Although it was important to ensure that all young people had access to the same level of service, there was also an acknowledgement that the colleges in Southampton were all quite different and that service delivery within them needed to reflect this. One way in which this was apparent was in the way that the chlamydia screening events were promoted. In one college, posters were put up advertising the event so that the students knew when it was going to take place. However, it was recognised that an alternative approach would work better in one of the other colleges, so they chose to use their sports teams to work alongside the sexual health staff to encourage students to take part in screening.

The service is part of a larger health and well-being drop-in facility, where students are also offered guidance about substance and alcohol misuse, smoking and counselling services. The Network facilitates opportunities for the specialist sexual health nurses and the student support staff to identify students who are particularly at risk and who may benefit from PSHE education including SRE. The SRE element of this course is delivered by the sexual health nurses. Workers meet to identify student groups a term in advance, to enable the nurses to have time to plan for the sessions. These sessions have been targeted at young men and at courses with high drop-out rates due to unplanned pregnancies.

Events

Southampton, Portsmouth and Hampshire & Isle of Wight are joining forces to run a cross-border event for colleges to focus on the colleges' role in promoting student sexual health, and the local services and resources available. The event will be run by sexual health staff and will be aimed at college staff. This event will look at both sexual health services and sex and relationships education. It will aim to promote consistency of provision in all Southampton colleges with a view to developing and sharing good practice across the county.

Policy development

The Network has developed a citywide confidentiality policy and service level agreement. This will ensure consistency of service throughout the city and will enable young people and practitioners to understand exactly what 'confidentiality' means within sexual health services in Southampton.

Funding

This project was commissioned using joint funding from the Teenage Pregnancy Grant and the Department of Health contraception allocation to PCTs. The funding was provided to reduce conception rates and increase contraception use in young people attending FE. The teenage pregnancy grant is now an area-based grant. This allocation was used to commission the voluntary sector input. The PCT funding was used to expand the specialist sexual health nurse team and is from a Department of Health allocation.

Training

Current training for workers is provided within the framework of a larger training package for all children and young people's workers. Mapping is still taking place to identify further training needs for sexual health workers within colleges.

Young people's participation

Three Southampton college partners took part in a Department of Health-led initiative called Want Respect? The campaign involved peer-led sexual health promotion. Mentors from each college were trained by an external organisation and ran events for students on each of the college campuses. Training was initially offered to one college only. The Network acknowledged that this should run across all three colleges and funded the other two colleges to have a joint training session. A 'train the trainers' event for staff (both clinical and non-clinical) was also run so that the programme could be sustained within the colleges without the need to bring in external trainers in the future.

Altogether 2,000 young people were reached through the campaign and it received a lot of media interest. The campaign ran in three colleges over 2008/2009, and will run again in the lead-up to Valentine's Day next year.

Want Respect? is also being used as the brand to create student survival kits and the citywide promotion of college-based services.

Two out of the three colleges ensured that student consultation was part of the planning process for developing sexual health services. This was clearly beneficial. The remaining college consulted students after the development of the service and this resulted in changes having to be made once the service was up and running as the students identified limitations in the way it was being delivered.

Monitoring and evaluating

Termly monitoring of service uptake is documented by each provider and supplied in their commissioning reviews on a quarterly basis. The information gathered includes the service user demographic, services that they have accessed and needs that they have identified. Evaluations will also include service users' views and this will be collected by No Limits. An annual evaluation is planned in the spring term of 2010, as services will have been running for a year. The purpose of this is to examine whether the service location, hours and model are still meeting the identified needs of the young people in each college.

Plans are in place for colleges to self-assess against – and fulfil the You're Welcome quality criteria. Evaluation and monitoring will be consistent across all three colleges.

Cost effectiveness will be reviewed within the sexual health spend mapping, to be completed by the Sexual Health Strategy group in March 2010.

Early evaluation of the project indicates that it has been a great success. Measurable indicators include:

- 60–70 young people have been seen weekly across the services.
- Chlamydia screening has increased from 5.9 to over 14 per cent.
- Quick and easy access to unplanned-pregnancy services (under 10 weeks) was maintained.
- The number of young people under 20 having terminations during the first six months of 2009/2010 is lower than in the previous year.

Colleges, in partnership with the voluntary sector, are now acting as a gateway for the community into the PCTs sexual health services. Services are evidence based and all colleges are mindful to ensure that this evidence contains a strong student voice.

There have been some difficulties in finding appropriate spaces for some of the services, and the colleges have been undergoing building and refurbishing work. However, it is anticipated that these challenges will be resolved in due course.

Looking to the future

The Network is beginning to take a broader health and well-being role and has begun to link with professionals from other disciplines, including substance misuse and CAMHS. Southampton is now developing work outside the city and has begun to link in with other local authorities within the region. It is anticipated that this will enable the network to develop over time so good practice and skills can be shared and resources maximised.

Wigan

Material for this case study contributed by Liz Dobson, Specialist Health Nurse.

Background

Wigan PCT has worked strategically to provide sexual health services and SRE in further education colleges in the area. The impetus for this work came from looking at local teenage pregnancy rates and sexually transmitted infection rates. Wigan and Leigh College identified that they had a large number of students becoming pregnant and leaving college. The PCT approached the college and together they discussed ways in which this could be addressed.

Who is involved and what roles do they take?

The services have been developed between Public Health (in the PCT), FE colleges in Wigan and college nurses. This strategic working has enabled the services to increase from one nurse based in Wigan and Leigh College, to the employment of three nurses working across four colleges (nine sites). The nurses have been funded by the PCT, plus an extra 15 hours' funding a week has come from Wigan and Leigh College. In addition, in partnership with the Teenage Pregnancy Service, £16,000 was recently secured for the development of the sexual health centre at Wigan College.

A specialist college health nurse coordinates services across the PCT as well as running drop-in clinics, delivering tutorials and health promotion events. This includes liaising with the teenage pregnancy coordinator and other young people's services, including drug and alcohol support and stopping smoking services. The nurse leads the coordination of this service and liaises with all relevant partners.

The specialist health nurse meets with Public Health every half-term for an information-sharing session about the service. The colleges have joint termly healthy college meetings and each individual college also has an in-house meeting once a term. The specialist health nurse also attends other local agency meetings to enable joint working.

The two other nurses run services within the colleges. Public Health's role is to support practitioners by providing supplies, support and staff development. The colleges have supported these services by providing rooms on site for sexual health service clinics. The nurses receive training from external agencies and partners such as the University of Central Lancashire, Brook, and young person's drugs and alcohol teams. The nurses are also supported by the specialist college health nurse.

Services

Colleges in Wigan now provide the following services:

- regular sexual health drop-in sessions
- the emergency contraception pill
- condoms
- pregnancy testing
- chlamydia screening
- the contraceptive pill
- SRE for pupils within the tutorial programme, delivered by the nurses within the college.

In addition, there is a dedicated sexual health centre located at Wigan and Leigh College for all students based in Wigan. The tutorials take into account the needs of the students in the group. The training has been offered to all colleges.

Training and staff development

Training for the college nurses has covered subjects entitled:

- stop smoking
- drugs and alcohol
- asymptomatic sexual health screening
- chlamydia screening.

The Stop Smoking Service, Drugs and Alcohol Team and the RUClear screening programme deliver training to both college staff and nurses. Nurses deliver training around sexual health to college staff. Nurses identified that it would be beneficial for college staff to have further training so that they could support the nurses to deliver services. Nurses identified that confidentiality continues to be a key issue for which workers need clarification and guidance. To date, the training has only been accessed by college staff in one of the colleges. However, training has been offered to other colleges and it is hoped that this will be taken up in due course.

Young people's involvement

Young people have been consulted in the design and delivery of the services. They were asked what they would like the service to be called and what time sessions should be delivered. They identified that they wanted nurses to wear uniform so that they could be recognised. Young people's feedback has been informal and has been gathered within tutorials and in the clinics.

One young person explained why they think the services are valuable.

It's a really worthwhile service that has friendly, approachable staff. It is confidential and I feel safe sharing information. The tutorials are good fun and informative. Health promotion events are good fun and open your eyes to risks. I have been involved in events as a peer mentor which was great. It's good that we can access this service in college and receive the support from someone we know.

Monitoring and evaluating the service

The evaluations of the services are both qualitative and quantitative. Termly reports are completed by college nurses and document how each college is engaging in the delivery of sexual health services. They include numbers attending, why they are attending, number attending of each gender and any problems with the service. Practitioners take all comments from students on board about how to develop the service.

Key changes that have taken place

Since the cross-college service has started there have been significant changes in services available for students. There are now regular sexual health sessions available for students, including emergency contraception available in colleges.

Professionals have been given the opportunity to develop their skills and deliver these services in college settings. There is now a consistent approach to sexual health service delivery across FE colleges in Wigan based on a good practice model.

The nurses are currently funded mainly by the PCT, with the exception of a contribution of 15 hours per week from Wigan and Leigh College. The contract is held by the PCT. This allows access to all the support the PCT can offer the staff, including training and supplies. There is recognition that the students like the fact that the nurses are a separate service from the college and feel comfortable that information shared is confidential.

Croydon

Material for this case study contributed by Kate Naish, Teenage Pregnancy Coordinator, and Katie Greenaway, Sexual Health Outreach Nurse for Young People.

The aim of the project

The aim of the project in Croydon is to improve sexual health service provision and SRE to young people of post-compulsory school age. There was a recognition that conception rates in Croydon amongst post-school aged young women (16–18 year olds) were high and the project also aimed to reduce these rates.

Strategic development

The initiative was led by the teenage pregnancy coordinator for Croydon. Following a teenage pregnancy needs analysis, the teenage pregnancy coordinator put in a bid as part of the NHS Croydon Commissioning Strategy and local Operating Plan for funding for a variety of young people's sexual health promotion and contraceptive initiatives. Service development in FE colleges was one element of this bid and an additional £15,000 was made available by the Department of Health to assist with the development of the sexual health clinics during 2009/2010. This funding has been used to help fund an additional session in one of the colleges where it is located on two sites.

Partners involved

This initiative included all three colleges in Croydon, and involved working closely with senior managers in the colleges as well as welfare and enrichment leads. Additional support has been provided to help promote general SRE and sexual health information events within the colleges from the NHS teenage pregnancy team, other health colleagues and local voluntary sector partners. The purpose of all key organisations working together was to ensure that all young people in Croydon attending college were able to access a holistic package of sexual health care.

Service development

Sexual health outreach services have been set up in all three Croydon colleges. These clinics are run by the young people's sexual health outreach nurse. These take place once a week for two to three hours. Young people tend to access this service on a drop-in basis; however, appointments are also available.

Each of the colleges sits on the local Healthy College Strategic Steering Group. As part of this initiative all the colleges have either developed or are in the final process of developing comprehensive SRE policies. They are also working with the local teenage pregnancy team to deliver teenage pregnancy prevention programmes (TP3) and sexual health peer mentoring

opportunities. They have also been involved in delivering twice yearly DASH (drug, alcohol and sexual health) education and information events in each college, along with other sexual health information and chlamydia screening events.

The teenage pregnancy coordinator and other members of the young people's sexual health outreach and teenage pregnancy teams deliver specialist SRE and sexual health services within the colleges. The following sexual health services are available in all colleges as part of the sexual health drop-ins:

- sexual health information, advice and support
- free condoms, femidoms and lubricant
- pregnancy testing
- referral for termination
- chlamydia testing and treatment
- emergency contraception
- hormonal contraception, including contraceptive pills and Depo-Provera injections
- advice on and referral to family planning services for implant/IUD
- advice on STI screening at the genito-urinary medicine (GUM) clinic.

Working with specific groups of young people

In addition to the sexual health clinics set up in each of the colleges, sexual health services have also been developed in the youth offending service, the Leaving Care and Independent Service (including the Looked After Children's Service) and in two local youth centres located in high teenage pregnancy rate wards. Much of the SRE delivered by the team is targeted at particularly vulnerable young, asylum seeking young people, looked after children and care leavers, and young people under the youth offending team.

The needs of LGBT (lesbian, gay, bisexual and transgender) young people are included in the colleges' SRE policies, developed with advice from the teenage pregnancy team. Sexual health services are also mindful of the needs of LGBT young people and those exploring or questioning their sexuality. In addition to these generic services, Croydon also has specific LGBT support services for young people.

Learning and future development

It was recognised that it is necessary to have a local champion who can ensure that the vision is implemented. Benefits to the college must be clearly explained and the strategy promoted as a joint enterprise. If the college is unable to contribute funding, it is worthwhile exploring other ways in which they can contribute to supporting the clinic. In order for a successful SRE programme to be delivered, the college must have an SRE policy in place from the outset.

Monitoring and evaluation of uptake is happening in every clinic and includes analysis of the demographic as well as the

type of sexual health service required. User evaluation is also beginning to be undertaken. The outcome of this will feed into next year's work plan.

If demands exceed current availability after a six month monitoring period, consideration will be given to increasing service provision during 2010/2011.

Other considerations for 2010/2011 include:

- development of a LARC clinic in one of the larger colleges in partnership with the local contraceptive health service
- provision of screening for other STIs.

Leicester City and Leicestershire County

Material for this case study contributed by Katie Philips, Teenage Pregnancy Coordinator.

All further education providers in Leicester City and Leicestershire County are working in partnership with their local teenage pregnancy partnerships, in particular the local teenage pregnancy coordinators and City/County Community Safer Sex Projects.

The network

Leicestershire and Leicester City further education colleges have developed a network to bring providers together to share good practice in delivering sexual health services and in supporting the wider teenage pregnancy agenda, for example SRE. The network enables workers from these colleges to meet and discuss how delivery works in their particular establishment in order for best practice to be shared and for a strategic approach to developing support for the teenage pregnancy agenda. Currently partners are meeting every six to eight weeks.

The network is supported by the County and City teenage pregnancy coordinators and workers from the local Community Safer Sex Projects who support the localities to deliver condom services, train workers to provide condoms and pregnancy tests, and then offer ongoing support. The network provides opportunities for support to be offered to colleges that do not have a sexual health service; and for colleges with existing services to move from basic to advanced provision. The network has been running since early 2008.

Funding

In February 2009, a successful bid was made to the Strategic Health Authority (SHA) for money that was made available via the Department of Health. This bid enabled the development of the network and provided a focus for the group to further deliver its aims. The successful bid had particular areas on which to focus: communications work/publicity and the delivery of events; workforce development; and research into access of services by young people from BME (black and minority ethnic) groups. To ensure positive action, the network set up task and finish groups to lead on key actions between the full forum meetings. An email network has also been set up to aid communication between meetings.

Workforce development

The network has identified training needs by consulting with leads from each institution; and events will be set up to ensure that these are met. Training will be for workers across all FE colleges in Leicestershire and Leicester City. Sessions will be targeted to meet the needs of particular members of the college workforce. Training has already been delivered to workers who are delivering sexual health services. Training will be given to tutors in order to support the delivery of SRE.

Events will include training on:

- access to services for under 16s
- Red Box training (use of the contraception resource box from fpa)
- long-acting reversible contraception – ensuring that young people have the opportunity to consider a full range of contraception
- sex and the law.

Communication events

Work on communications has so far focused on organising roadshows, which took place in all colleges in autumn 2009. Their purpose will be to promote the in-college sexual health services.

The network have agreed on a common message and branding, which will be used on all the roadshow resources in all the colleges. The strapline is 'Knowing you, knowing me, knowing what to do' (a copy of the logo is available on request). Also, 15,000 goody bags are in production, which will be distributed as part of the roadshow events and will feature a 'Tracy Eminesque' blow-up bed as a visual centrepiece. The long-term plan is to hold two events in each college per year to promote safer sex practice and highlight local services.

Research project

Leicester City has a large percentage of young people from black and ethnic minority backgrounds and staff have reported that there are a range of issues at play in terms of ensuring that services are accessible to all young people. Further funding was secured from the SHA to explore the implications of this and to ensure that young people from black and minority ethnic group backgrounds are not excluded from receiving information and accessing services, and are therefore not subsequently placed at risk. The research project started in September 2009.

Young people's involvement

Young people will be involved in the development of services across all the colleges. There are plans to involve young people in 'mystery shopper' exercises as well as individual and group consultations about current provision and future needs. Information gleaned from these exercises will be used to develop future services. Colleges will work with their student councils to ensure that all services are relevant to students.

Key partners

Individual City and County FE leads from the colleges sit on the City and County strategic teenage pregnancy partnership boards, which have multi-agency representation. Key contacts include:

- City and County teenage pregnancy coordinators
- City and County community safer sex projects
- City and County public health teams

- the Leicestershire and Rutland chlamydia screening programme
- the County healthy schools team
- the City PSHE education team
- local voluntary and community groups.

Monitoring and evaluation

Young people

The monitoring of the autumn roadshow was undertaken by looking at the take-up figures of in-college sexual health services. By comparing them to previous years, it is hoped that the impact of the roadshow will be able to be evaluated.

Each college will also be undertaking other methods of evaluation and these will be discussed at forum meetings.

Practitioners

Practitioners who have attended training courses complete questionnaires about what they have learnt and how the training will have benefited their practice.

There are plans to contact samples of training delegates six months after the training has been received in order to explore the impact that the training has had on their practice and subsequently on the college.

The Community Safer Sex Project staff will visit college services to offer support in terms of delivery in line with the You're Welcome criteria.

Quantitative measures will include:

- teenage pregnancy rates
- the number of people taking up in-college services (monitored via quarterly submissions to the Community Safer Sex Projects)
- the number of people having chlamydia screening (both at health events and through in college services)
- the number of referrals to specialist sexual health services (monitored by Community Safer Sex Projects).

There has been a mutual agreement that the collaborative approach is effective and that larger results can be realised through this approach. The one college that didn't have an on-site service opened a service in September 2009 – a result of talking to other colleges who have allayed their fears and provided solutions to potential problems.

The roadshows that are planned are creative and the development of resources would not have been possible had each college been working alone.

Challenges and learning

The network still requires a lot of input and support from the teenage pregnancy coordinators and it is hoped that eventually the network will become self-supporting with representatives from the FE colleges taking more of a lead role in the running and development of the network.

Colleges were generally not fully aware of what the others were doing and are learning a lot from one another – the network members have really valued coming together to share practice and discuss common issues. So much can be achieved when working together.

Future plans

The colleges have agreed that they will again put in a joint proposal for the 2009/2010 SHA money.

Future plans include:

- SRE work – employing an advisor to work across all the colleges to develop and implement an SRE toolkit, which will enhance SRE delivery for young people in FE
- resource development – young people in all the colleges will be consulted on what resources they anticipate would be well received and this will contribute to the resources delivery plan
- support for young parents – looking at the key role that FE plays on this part of the teenage pregnancy agenda.

The case studies reproduced in this Appendix can also be accessed from the Sex Education Forum website: www.ncb.org.uk/sef



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