



DERBY CITY COUNCIL

CABINET MEMBER FOR CHILDREN AND YOUNG PEOPLE MEETING 17 JULY 2007

Report of the Corporate Director for Children and Young People

Further development of extended school-based health services through Derby Teenage Pregnancy Partnership

RECOMMENDATION

- 1.1 That Cabinet supports the principle that all secondary educational establishments, mainstream, special and the Pupil Referral Unit (PRU), have the opportunity of delivering extended school-based health services and that the C scheme be added to the menu of options available, subject to appropriate consultation and approval.

REASON FOR RECOMMENDATIONS

- 2.1 The National Teenage Pregnancy Strategy (1999) has established a target for authorities to reduce under-18 conception rates by 50% by 2010 (Derby 55%). Derby currently is **Amber/Red** status -14.1% (2005). In 2004, 45 out of 241 under-18 conceptions were to under-16s (19%).
- 2.2 Teenage pregnancy is a high priority in the Children and Young People's Plan. It will also be a focus for the forthcoming Joint Area Review – JAR.
- 2.3 Schools have a key role to play in providing supportive Personal and Social Health Education (PSHE) and improving access to sexual health services. DfES guidance (2006) encourages and supports improved access to sexual health services through extended schools. This need was identified by young people in consultation for the City's Children and Young People's plan.
- 2.4 Extended school-based health services provide an opportunity for young people to seek advice in a safe environment and from a specially trained nurse with follow-up support.

SUPPORTING INFORMATION

- 3.1 Some of the most vulnerable young people at risk of teenage pregnancy include those with low aspirations, poor school attendance, dislike of school, Looked After Children and young offenders.
- 3.2 Young people of statutory school age who are sexually active are particularly vulnerable and are at a high risk of unplanned pregnancy and sexually transmitted infections. They are less likely to seek advice and support from other sexual health services or use contraception.

- 3.3 By extending health services in school, teenagers will have the opportunity of receiving easy access to good quality information and advice about sexual health.
- 3.4 The development of these services will improve outcomes for young people. In particular it will:
- improve access to sexual health services for vulnerable young people of statutory school age
 - provide young people with the opportunity to gain confidence in discussing all health concerns early with a school nurse with follow-up support
 - provide young people easier access to sexual health and relationship advice where they will be encouraged to delay early sexual activity
 - provide follow-up support by a C scheme trained school nurse
 - aim to reduce the risk of unplanned pregnancy and sexually transmitted infections for young people
 - provide an opportunity for a holistic discussion about health issues with young people. Extended school health service would be delivered as part of a wider integrated PSHE programme
 - provide an opportunity for young people to discuss sexual health and negotiate delaying sexual experience or, when sexually active, negotiate safer sex.
- 3.5 There are a number of risks and objections which need to be considered, these include:
- school/parental objection - anxieties would be address through consultation with parent and young people. This is an optional service
 - potential safeguarding concerns - there is clear guidance in the C scheme protocol (2007) about how to support young people under 16 who are sexually active in line with Derby and Derbyshire Safeguarding procedures
 - adverse media interest – ‘Diva’ PR agency commissioned by Derby Teenage Pregnancy Partnership can provide advice and support to schools, the Council and other members of the teenage pregnancy partnership.
- 3.6 The Professional Executive Committee Derby City Primary Care Trust has already considered the proposals and support future development of services.
- 3.7 A briefing has been provided for secondary head teachers who have agreed that it will be for individual schools to decide about extending services in consultation with school staff, governors and parents.

OTHER OPTIONS CONSIDERED

- 4.1 Young people of school age can access similar provision across the city - shops, pharmacies and other sexual health services. However, they will not always receive follow-up support.

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Background papers: None

List of appendices: Appendix 1 – Implications
Appendix 2 – Further development of extended school-based health services through Derby Teenage Pregnancy Partnership

IMPLICATIONS

Financial

- 1.1 Service funded through existing resources by the PCT.

Legal

- 2.1 There is clear guidance in the C scheme protocol about how to support young people under 16 years of age, who are sexually active, in line with the Derby and Derbyshire Safeguarding procedures.

Personnel

- 3.1 The extended school model can only be delivered in school where the nurse has received the specialist training.

Equalities impact

- 4.1 This will be more accessible for young people of statutory school age who are sexually active and less likely to seek help elsewhere. Extended school-based health services provide an opportunity for young people to seek advice in a safe environment and with follow-up specialist support.

Corporate objectives and priorities for change

- 5.1 Reducing under-18 conception rates by 55% is a high priority in the Children and Young People's Plan and supports the corporate priority of:
Helping us all to be healthy, active and independent.

Further development of extended school-based health services through Derby Teenage Pregnancy Partnership

A number of schools in the UK are currently in the process of, or have begun to offer, a holistic confidential school-based health service as part of the reforms that are happening across the UK.

DfES and the Department of Health share a challenging target to halve the under-18 conception rates by 2010. Recent guidelines to local authorities and PCTs on effective delivery of local teenage pregnancy strategies recommend a range of measures to improve young people's access to sexual health advice and contraceptives. To help support the local Teenage Pregnancy Strategy, schools can make a significant contribution to help improve young people's access to specialist advice and support from health professionals where health advice is located close to the point of need. This ensures links to be made for young people between young people-friendly health services and the PSHE curriculum.

Provision of school-based health services through enhanced school nurse services ensures young people are able to make informed choices about their sexual health and the advice and information they need to delay first sexual experience whilst understanding the importance of protecting themselves from risky sexual behaviour that could have negative consequences.

Providing access to confidential health services enables schools to make a clear contribution to the Every Child Matters outcomes and achieve standards through the Healthy Schools Programme for PSHE as well as ensuring the continued health and well-being of young people.

In a recent interview with the Guardian newspaper, Beverly Hughes, Minister for Children and Families, said in support of Extended School-Based Health Services:

"I want to make it clear that the detail of a school's sex and relationship education policy is determined at a local level between the governing body, teachers and parents. We really support schools that want to implement the policy to provide a wide range of services and within that access sexual health advice. We know it is something many parents find difficult to provide themselves, although young people say that's where they would like it."

Evidence

- *25-30% of young people have sex before they are 16. They are least likely to seek contraception and sexual health advice. Increased risk of pregnancy and sexually transmitted infections.*
- *50% of conceptions to under-16s lead to abortion. Outcomes for teenage mothers and their children are worse.*
- *High level of regret for under-16s who are sexually active.*
- *Improving access to advice and support on relationships sexual health and contraception through PSHE and services is key to helping young people make healthy choices.*

Teenage Pregnancy Accelerating the Strategy to 2010 – DfES 2006

In 2003, as part of Derby's Teenage Pregnancy Partnership action plan to improve access to health services for young people, Central and Greater Derby PCTs and Derby LA agreed

at a strategic level to support secondary schools in the development of extended school-based health services.

The Extended School-Based Health Service will offer young people:

- confidential health services to allow young people to take responsibility for their health
- health advice closer to the point of need, ensuring young people can easily access services they may not be able (or want) to access in traditional clinical settings
- support around a whole range of issues, including emotional well-being, raising self-esteem, acne, weight gain/loss, anti-bullying, sexual health and drugs awareness
- advice, guidance and information
- an accessible, sensitive and inclusive service, aiming to meet the expressed needs of young people
- it also works towards supporting the school to reach the accreditation of the National Healthy Schools Standard
- support the schools in providing Extended Services' core offer of swift and easy referral.

These services are in line with national guidelines and advice from professional bodies such as the British Medical Association, the Royal College of Nursing and the Royal College of Obstetricians and Gynaecologists.

One of the additional options agreed in 2003 was the issuing of emergency hormonal contraception by a trained school nurse under supervision through a Patent Group Directive (PGD). This service was subject to school and governor approval. Since 2003 a multi-agency team has had discussions with four secondary schools that expressed an interest in providing this service. Although no school has accepted the offer, there continues to be interest.

In autumn 2006 Derby and Derbyshire PCTs set up a 'C' scheme providing better access to sexual health and relationship advice and condoms. Eight school nurses have completed the C scheme training. Some nurses have recognised the need and opportunity to deliver the C scheme through secondary schools and the KS3/4 PRU as part of an extended school health service subject to appropriate approval.

This is a partnership arrangement with schools and school health services working together.

All secondary schools will be invited to participate in further discussion.