# HEALTH AND CARE OVERVIEW AND SCRUTINY PANEL 23 JANUARY 2024 7.30PM – 8.27PM



# **Present Virtually:**

Councillors Cochrane, Collings, Egglestone, S Forster, Harrison, Watts, Webb and Welch

### **Also Present Virtually:**

Rebecca Willans, Consultant in Public Health

#### 1. Declarations of interest

There were no declarations of interest.

#### 2. Public Health Presentation on Sexual Health Provision

Rebecca Willans, Consultant in Public Health presented slides which provided an overview on sexual health services in the borough. The following points were covered:

- A diagram summarised the responsibilities for local authorities, integrated care boards and NHS. It was noted that most activity around reproductive health choices and access to contraception was delivered through General Practices with around 70% of women accessing contraception through this setting. Local Authorities were mainly responsible for putting in place specialist sexual health services through funding from the Public Health grant. In Bracknell Forest this was delivered through the Berkshire Healthcare Foundation Trust.
- A range of other services and settings involved in supporting good sexual health were shown. A common requirement for good sexual health included access to high quality information from trustworthy sources. Providing these facilitated individuals to make informed choices regarding STI testing and contraception choices.
- Reducing stigma around sexual health was noted as a common need.
- The importance of good quality sex and relationship education and support for parents was noted. This was mandatory in primary and secondary schools.
- Data to show key indicators for sexual health outcomes in the local authority was shared. It was noted that in Bracknell Forest the chlamydia detection rates and proportion of 15–24-year-olds being screened was significantly worse than the benchmark and national average.
- Late HIV diagnosis in Bracknell Forest was also significantly worse than the national target.
- Core sexual health services in Bracknell Forest were highlighted. The specialist
  integrated sexual reproductive health provider commissioned to the authority was
  the Berkshire Healthcare Foundation Trust and this provided tier 3 sexual health
  services. This was based at the Garden Clinic in Slough and provided services
  for complex STI's, recurring infections and long-acting reversible contraception.
  Skimped Hill was open two days a week for routine STI testing and long-acting
  reversible contraception. A facility was also available in Reading.

- Berkshire Healthcare Foundation Trust subcontracted SH24, an online service that provided home test kits – capped at 15 a day. There was a complaint received in 2023 about difficulties accessing these kits. Whilst recognition of further demand was noted this needed to be done in a balanced way to ensure the appropriate health promotion was provided alongside the service.
- Eight out of the eleven GP's in Bracknell Forest provided long acting reversable contraception services. For those who don't this could be attributed to not having trained staff to provide the service.
- Only one pharmacy in Bracknell Forest could offer emergency hormonal contraception services for 13- 24-year-olds. Work was ongoing to improve this offering.
- The Safe Sex Berkshire website was mostly used by 19–25-year-olds as this was where they were often signposted by professionals.
- The Youth Team by Thrive worked with three secondary schools to support sexual reproductive health education in schools.
- Other services connected to sexual health included BPAS as a provider of termination of pregnancy and Frimley Healthcare Foundation Trust as a provider of maternity and gynaecology services.
- A visual graph illustrated the numbers of Bracknell Forest residents accessing different providers and highlighted how the pandemic impacted the way services were provided and has resulted in a lot more people now choosing online services.
- Numbers using Skimped Hill had declined since the pandemic and there was an
  increase in numbers visiting the Slough clinic. A hypothesis for this was that
  people who were not able to use online services had more complex needs that
  required the specialist care provided by Slough.
- STI testing rates. A graph illustrated that in Bracknell Forest, currently and historically, testing rates and positivity were roughly in line which indicated correct targeting of testing.
- The high proportion of STI's diagnosed among people from black or black British, mixed and white backgrounds across Berkshire East was roughly in line with the national figures.
- A bar chart was used to illustrate the percentage of Bracknell Forest residents
  who accessed a specialist sexual health service by provider over the years from
  2015-2021. This showed that between 85% and 95% of Bracknell Forest
  residents who used a specialist sexual health service attended one of the five key
  sites. Significant changes were seen in the numbers using online services and
  more people attending The Garden Clinic in Slough and less at Skimped Hill in
  Bracknell.
- The final slide showed a map which highlighted the good coverage of provision for Long Active Reversible Contraception (LARC) and illustrated that the GP's offering this service were in areas of high density population.

The following questions were asked by panel members:

Q. Was there only one service that provided condoms for teenagers or were there alternative places?

A. Free condom access for young people was limited but was available through pharmacies and Skimped Hill. It was noted that the youth service used to have an offering in this area, but it was unknown if this was still available as part of their outreach service into schools. Focus groups were being run with young people to explore awareness of services and their locations and obtain views with an aim of developing safe spaces where access to all needs could be met.

Q. Was there a phoneline or online chat that provided sex advice?

A. Berkshire Healthcare Foundation Trust (BHFT) provided this and it was available on the Safe Sex website. Development of the online service was noted during the health needs assessment that was run in 2023 and this was a priority area for development.

Q. Are the STI test kits free?

A. Yes. There was alternative provision where they could be bought. It was noted that the free service offered by BHFT also offered a triage service alongside it to meet other needs such as emergency contraception or pregnancy testing.

Q. Did the clinics offer walk in appointments?

A. Yes. At Skimped Hill there was also a specific clinic for young people on a Thursday 3-5pm. At Slough there was walk in available throughout the week. Waiting times for these walk-in appointments was no longer than 30 minutes.

Q. Why was Frimley Park removed as an available site for Bracknell Forest residents?

A. It was noted that this could be due to staffing and it not being a business priority area for Frimley.

Q. The data presented only went up to 2021 which was at the end of Covid. Was there any data since that had any difference in trends?

A. It was confirmed that the data presented was the most up to date that was published. Meetings with BHFT took place each quarter to look at performance and no issues or challenges had been noted. There was some concern raised through a survey around access to urgent contraceptive appointments which had been explored but to date there was not a specific answer found to address this. It was noted that lack of awareness amongst professional groups existed, particularly those working with young people, around signposting to local services.

Q. What qualified as emergency contraception?

A. Emergency Hormonal Contraception (EHC), long-acting reversable contraception. Termination of pregnancy would not qualify as emergency contraception. It was noted during this response that there was a drive to increase the number of pharmacies offering these as they are often seen as a more accessible option.

- Q. Was the low rate of chlamydia detection due to a lack of information and reluctance of people testing or because there was a lower incidence rate?

  A. It was explained that the national chlamydia screening programme changed a few years ago to include opportunistic screening, testing offered to any young female who visited a GP, pharmacy or specialist setting with sexual health needs. Evidence suggested that a higher proportion of screening exposed the detection. A local challenge was the lack of provision for chlamydia screening, only available at the specialist sexual reproductive health service and online STI test kits. The broadening of this offer was being explored.
- Q. Could people self-test for chlamydia?

A. Yes, if they were asymptomatic. If symptomatic they would need to visit a specialist clinic.

Q. Was there a specific group who attended secondary schools to deliver sex education? Were the council in communication with them?

A. Bracknell Forest youth services were responsible for this and worked alongside the Bracknell Forest Public Health team. The offering was broad and provided

access to condoms and sexual health promotion advice. BHFT were working alongside the youth service team to develop a more comprehensive model to include STI testing. It was noted that a priority was to work with young people locally to further understand what the most appropriate settings would be to provide a range of services. There wasn't a sense of much relationship between the council and local school within this area.

- Q. Was there any education in schools relating to same sex relationships?

  A. It was noted that this could form part of the Personal, Social, Health and Economic, PSHE, education and a response would be provided for the panel. There were some links within the Safe Sex Berkshire website that provided information around gender identity and sexuality.
- Q. Was there follow up after ordering of a test if the result was negative?

  A. No, if a result was negative that was the end of the pathway. The individual would have received relevant triage and health promotion when ordering the test.
- Q. A point was raised that the highest growth within the community of people contracting STI's was within the older age groups. As this age group hadn't received much information around this area during sex education at school was there anything in place to target and educate this group?
- A. There was no specific local strategy to target this age group but lessons could be learned from other areas of the country who were developing this. Specific reference was made to 'Shift', a project that focussed on this. It was noted that whilst children and youth were a priority there was a gap identified within health promotion for this older age group. Rebecca Willans would come back to the panel with further details on this.

The Chair thanked Rebecca Willans for her time.

# 3. **Draft Sexual Health Scope**

The draft scope was shared online with the panel for comments. The following was raised:

- The lack of pharmacy provision for emergency contraception should be added to the scope.
- A point was raised about looking further at the PHSE provision around LGBT groups and it was agreed that the panel would wait for feedback from Rebecca Willans around this topic.
- The panel agreed for the scope to go forward to the Overview and Scrutiny Commission meeting on 29 February for approval.

# 4. Future Scrutiny Review Ideas

The following topics were proposed for future reviews:

- Brants bridge investigate the provision and its change from being an urgent walk-in centre.
- Expand on sexual health and look at the provision for SEND pupils.
- Effects of COVID lockdown on mental health services and assess the overall availability of services.

• Childrens dental health with a focus on what provision there is around a programme of education for children's healthy teeth to enable better care.

**CHAIR**