



Children & Young People's Overview and Scrutiny Committee

Review of Under 18 Conceptions in County Durham

SUMMARY

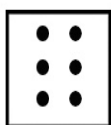
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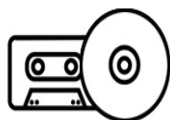
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Table of Contents

Chapter	Title	Page No.
1.	Chairman’s Foreword	1
2.	Executive Summary	2
3.	Key Messages	13
4.	The Scrutiny Review	18
5.	Policy & Literature Review International Context National Context Local Context	21
6.	Equality & Diversity – Issues & Considerations	28
7.	Findings from Working Group: Current Position Sex Relationship Education Contraception and Sexual Health Services Support for Young Parents Child Sexual Exploitation	30
8.	Conclusions & Recommendations	49
9.	Appendices 1. Project Plan and Scoping Document 2. National and Local Policies 3. Reports of the Joint Commissioning Board – including Commissioning Plan for Under 18 conceptions 4. Best Practice from other Local Authorities 5. Equality Impact Assessment 6. Note of Dragon’s Den Event 7. Survey Results of UK Youth Parliament Sex’Ed Survey 8. Visits 9. LSCB Child Sexual Exploitation Action Plan	i v xv li liii lx lxiv lxvii lxix

1. Chairman's Foreword



In order to sustain the downward trend in under 18 conceptions the County Council and its partners must continue to provide young people with information, advice and guidance (including contraception services) to enable them to make informed life choices. We should not forget that running parallel to this, through our school and colleges, educational achievement will help raise aspirations and help achieve the potential of our young people.

The Working Group has received information relating to Contraceptive and Sexual Health Services; Sex and Relationship Education and Support for Young Parents. We considered best practice and how services have been redesigned to provide better services for young people; received information from a survey that had been carried out by Members of the UK Youth Parliament for young people of secondary school age; heard of events where young people put questions they had on Sexual Health Services to service providers in a 'Dragon's Den' type setting; received information on Child Sexual Exploitation and how Durham Local Safeguarding Children's Board is addressing this problem.

The findings from the study suggest that better communication is needed to enable young people to know where to access services and information. Although Contraception and Sexual Health services have undergone redesign there are still access problems for some young people. Branding of emergency contraception has also been highlighted within the review, as some young people are not aware which pharmacies offer this free emergency contraception service. Young people in County Durham have asked that Sex and Relationship Education should put more on emphasis on the relationship element of the programme. By concentrating on relationships young people would become able to recognise the differences between positive and negative relationships.

The Vice Chair and I also visited a young parents' session at a Sure Start Children's Centre and visited a young parents' sheltered housing project in the county. It is important that support continues to be available for young parents, to let them know they are not alone, especially those who are vulnerable and do not have the support of family.

I would like to thank all those who have contributed to the study, my Vice Chair Councillor Christine Potts; fellow Councillors; Officers of NHS; Officers of the Council; Members of the UK Youth Parliament and most importantly the input from the young people of County Durham.

Councillor Jan Blakey
Chair of Children & Young People's
Overview and Scrutiny Committee

2. EXECUTIVE SUMMARY

- 2.1 In 1998 the UK had the worst under 18 conception rates in Western Europe. In an attempt to address this, the Government at that time developed a ten year Teenage Pregnancy Strategy. It set out to put in place measures and strategies to decrease the teenage birth rate to at least half and encouraged local authorities to devise their own Teenage Pregnancy Strategies relevant to their area.
- 2.2 The strategic goals for County Durham and Darlington were:
- to achieve a 10% reduction in the under 18 conception rate by 2004 and to achieve a 55% reduction in that rate by 2010.
 - to establish a downward trend in the under 16 conception rate.
 - to achieve a reduction in the risk of social exclusion for teenage parents and their children.
- 2.3 The Teenage Pregnancy Independent Advisory Group (TPIAG), a national body has reported:
- half of all under 18 conceptions occur in the 20% most deprived wards
 - one fifth of births amongst under 18s are repeat pregnancies
 - over one third of teenage mothers have no qualifications and 70% are not in education, training or employment
 - teenage mothers and fathers and their children are more likely to be in poor health and to live in poor housing.
- 2.4 The TPIAG also indicate those groups most at risk of teenage pregnancy include:
- young people truanting or excluded from school, or underperforming in education
 - young people in care or leaving care
 - daughters of teenage mothers
 - young people involved in crime
 - some ethnic minority groups
 - vulnerable young people.
- 2.5 The final performance figures for County Durham in 2010 will not be known until early 2012. Whilst it is not expected that County Durham will achieve the strategic goals and the very challenging targets set in the County Durham Teenage Pregnancy Strategy (2001), it is expected that the work of practitioners has led to a significant downward trend in under 18 conceptions. The rolling quarterly average has marginally increased, yet this still remains one of County Durham's lowest quarterly averages and County Durham is still performing better than regional and statistical neighbours. While the targets of the strategy will not be realised, it has increased awareness and resulted in better partnership working and positive programmes to support young parents. All five Children's Board localities will benefit from redesign of contraception services leading to a Saturday service being delivered.
- 2.6 The table below illustrates the under 18 conception rate change from 1998. The figures shown below are annual figures and represent the rate per 1000 young women between the ages of 15 -17 years. Using the information provided it is clear the under 18 conception rate in County Durham is consistently lower than Statistical Neighbours and the North East region over the last five years. County Durham has achieved a higher percentage reduction both nationally and

regionally from the 1998 baseline figures. The percentages shown are derived from individual baseline data from 1998 and the position as at the end of 2009. The % change differs due to varying levels across authorities in each comparator group.

Under 18 Conception Rate (per 1000)	1998 (Baseline)	2005	2006	2007	2008	2009	% change from 1998 baseline
ENGLAND	46.6	41.3	40.6	41.8	40.5	38.2	-18.1
North East	56.5	50.0	48.8	53.2	49.0	46.9	-17.0
Statistical Neighbours	59.0	51.3	51.5	54.4	53.3	47.7	-18.6
County Durham	54.4	49.2	46.6	50.6	48.5	44.0	-19.1

2.7 The Annual Commissioning report to the County Durham Joint Commissioning Board (Sept 2011), highlighted that in 2008 there were 467 teenage conceptions in County Durham. In 2009 this figure reduced to 408. A Commissioning Plan for Under 18 conceptions was considered by the Joint Commissioning Board November 2010. The commissioning plan is underpinned by the County Durham and Darlington Teenage Pregnancy Strategy and a plethora of national and local policies.

2.8 Although no value for money exercise has been undertaken by the County Durham Joint Commissioning Board it is known that by preventing under 18 conceptions there are benefits to the public purse. The cost to the NHS in responding to under 18 conceptions is for example estimated to be about £63m a year (nationally). Benefit payments alone to a teenage mother who does not enter employment in the three years following birth are approximately £22K.

Annual Commissioning Report, County Durham Joint Commissioning Board, September 2011

2.9 In their final report published in December 2010, the TPIAG stated that England's under 18 pregnancy rate is currently at its lowest level for over 20 years, but it is still unacceptably high. The evidence is clear that teenage parenthood results in poor health, under-achievement and low earnings for both the mother and her baby. They also recognise that it will be challenging to sustain downward trends in under 18 conceptions figures at a time of reduced public funding and removal of national targets; it stresses that existing provision should be reviewed and asks that reductions in spending are made strategically and thoughtfully.

2.10 As part of performance monitoring, Children and Young People's Overview and Scrutiny Committee receive performance management reports that provide information on a basket of indicators including under 18 conceptions. The committee agreed that the topic of under 18 conceptions be added to the work programme following information contained in performance reports and the end of the ten year Teenage Pregnancy Strategy. The scoping document and project plan for the review was agreed at their meeting in September 2011. (See appendix 1 of the full report).

2.11 The focus of the review was to:

- ensure that the figures received are the most up to date available

- ensure communication at all levels and between all stakeholders is fit for purpose
- examine the delivery of Sex and Relationship Education (SRE) in schools and if it is providing information to help young people make informed decisions and manage risks accordingly
- explore accessibility of contraception and sexual health services for young people
- consider the support offered to teenage parents and teenage mums to be to continue in education and training.

2.12 Using information contained in reports to the Joint Commission Board's Teenage Pregnancy Board the key lines of enquiry of the review were:

- Sexual Health and Relationship Education;
- Contraceptive Services;
- Support to Teenage Parents; and
- Data Intelligence and Communication.

2.13 Many local authorities have carried out scrutiny investigations into under 18 conceptions, but what works in one part of the country may not have the same impact in other parts due to differences in demographics, deprivation, culture and location. Below is a list of recent reviews carried out in other local authorities more information can be found at appendix 4 of the full report.

- St Helen's Council carried out a scrutiny investigation to look at how the council and its partners could improve education and training support opportunities to pregnant teenagers and teenage parents across St. Helens. The review makes seven recommendations surrounding continuation of funding to support housing projects, continuation of the monitoring of pathways and support packages offered to teenage parents.
- Bristol City Council carried out a scrutiny inquiry day in March 2011 specifically looking at in school provision in reducing teenage pregnancy. The review made nine recommendations that centre on the delivery of SRE in schools and asked that a letter is written to Secretary of State to stress the importance of solid sex and relationship education becoming part of the national curriculum.
- Stoke City Council carried out a scrutiny review in March 2010, to clarify performance information for under 18 conception rate and examine the current strategies in place for reducing the number of teenage pregnancies in their city. Recommendations from this review focus on the importance of partnership working to identify those most at risk and to roll out a multi agency programme with full co-operation from all schools in the city.
- Haringey Council carried out a scrutiny review of Sexual Health and Teenagers in March 2010. The review focussed on what the council and its partners do to promote and improve the sexual health of teenagers. The recommendations relate to raising the importance of sexual health amongst secondary school pupils and the continuation of funding to support the school nurse posts. The review also recommends that joint working with health commissioners and neighbouring boroughs would improve access to services.
- Croydon Council undertook a scrutiny review in January 2010 to investigate why their under 18 conception rates were not hitting targets and

recommended the remodelling of existing strategies for closer working involvement with all stakeholders.

- 2.14 The review received evidence over four meetings with site visits to a young parents' support session at Woodhouse Close Children's Centre and a Young Parents' Sheltered Housing Project. The working group received evidence on:
- The current position on under 18 conceptions in County Durham including background information.
 - Sex and Relationship Education is provided in all schools in County Durham but there are no best practice models resulting in an inconsistent level of SRE delivery across County Durham.
 - Contraception and Sexual Health services advised that the service had recently gone through a 'redesign' but there were issues about accessibility for some teenagers.
- 2.15 Young people were given the opportunity to question providers of services to ask why services were delivered in certain ways and what changes they wanted at a Dragon's Den type event (see appendix 6 of the full report). Questions to providers related to the range and quality of SRE delivery in all schools; methods used to consult with young people; and finding information from 'trusted' websites.
- 2.16 Information was given to the working group from the UK Youth Parliament Member for County Durham relating to a survey carried out by the UK Youth Parliament on Sex Education. The survey took place during the summer term 2011 in mainstream secondary schools across County Durham which had asked young people for their views on Sex and Relationship Education. The survey was available on line or via hard copy, it received 2376 responses from young people and the results indicate that they would like to see:
- Standardisation of all Sex and Relationships Education in all secondary schools in the North East
 - Provision of a specific qualification for teachers and health professionals to teach this subject in schools
 - Setting up of an SRE curriculum created with confidential student input
 - Ensuring SRE is a timetabled lesson carried out every week.

The UK Youth Parliament Sex 'Ed survey results can be found at appendix 7 of the full report.

- 2.17 It was reported that following the redesign of Contraception and Sexual Health (CaSH) services, clinics provide a much more user friendly service operating at times more accessible to more users including young people and providing more clinical hours. There are 29 clinics offered across County Durham covering a wide area. There are problems of how to cover rural areas and issues where young people will not use the clinics in small communities because of confidentiality perceptions.
- 2.18 Evidence was given on support offered to young parents, including information on a programme for under 19 year old girls who are pregnant. 'Mams to be' groups had initially begun in East Durham but were now being delivered in other areas of the County. Sure Start too offers various courses for young parents such as young parents' support groups; ABC2; and speakeasy are just a few of an array of courses offered to young people. There are also Family Nurse Partnership nurses

that offer one to one support to the most vulnerable young parents and support them from early pregnancy until the child is two years old.

- 2.19 The Chair and Vice Chair of the Committee visited a Young Parents' support session at Woodhouse Close which offered support to young parents covering a range of areas. While at Woodhouse Close the Chair and Vice Chair were invited to a nearby Sheltered Housing for Young Parents' Project which offers accommodation and floating support to vulnerable young parents helping them to build confidence and self esteem to adjust in their new role as parents.
- 2.20 Members of the Working Group received information on Child Sexual Exploitation relating to legislation to protect and safeguard children and young people; signs to look out for; the work of the Local Safeguarding Children Board; and multi-agency approach to protection.

Interventions & Impact

- 2.21 In County Durham there has been a downward trend in under 18 conceptions, however the rolling quarterly average has marginally increased, but this still remains one of Durham's lowest ever rolling quarterly averages. County Durham and Darlington Teenage Pregnancy Strategy 2001 increased awareness that resulted in enhanced partnership working. This has led to joint commissioning that has enabled gaps to be identified and actions to be put in place via the commissioning action plan, such as peripatetic contraception services at point of contact to improve access to contraception services.
- 2.22 A redesign of contraception and sexual health (CaSH) services took place after it was identified that clinic times were 'disjointed and confusing'. Redesign of services has led to a more up to date and modern service that provides a consistent level of service across County Durham that is suitable to local need.
- 2.23 Following the redesign of CaSH service there has been an increase of clinical care providing a full CaSH service that is universal to all clinics. This can range from providing contraception advice; inserting contraception implants, to screening for sexually transmitted infections. There has been an increase in the duration of clinic times to suit demand in service. Opening times of clinics are more user friendly especially to young people who had been unable to access them during their previous opening hours. Further engagement is needed to understand how the gap in service between urban and rural provision could be narrowed and how accessibility to services could be further improved.
- 2.24 Communication with young people has improved but consideration should be given to the methods of communication used. The development of a communications plan that brings together policies and procedures with regular updates and refresh would enable a clear, consistent and effective message to be given. Young people have suggested at the Dragon's Den event that they are more likely to use social media sites; websites and text messaging than reading leaflets. All communications should be regularly reviewed and updated to ensure its impact and have involvement of young people.
- 2.25 All schools in County Durham receive some form of SRE however the level of SRE is inconsistent across the County. The findings from UK Youth Parliament survey on Sex Education tell us what young people want from SRE:

- Standardised SRE lessons.
- Mixed classes.
- Relationship focused.

(A full copy of the results of the survey can be found at appendix 7 of the full report)

2.26 Support given to young parents such as ‘Mams to be’ and other young parent support programmes have enabled them to increase their confidence and self esteem to enable them to continue with education or training and deal with situations they face. The support given to young parents may prevent more costly interventions at a later stage; this follows the objectives of the Think Family Strategy it also encourages young parents to continue to integrate with others and aid their child’s development.

Key Findings

2.27 Key findings from the evidence submitted to the working group:

- There is a 14 month data lag in information supplied to the County Council from the Office of National Statistics. This was considered to be acceptable when taking into account the time needed to gather the information and compile the statistics. Latest performance information applies to April to June 2010, and shows 102 Conceptions which is the joint second lowest number of conceptions during this period for Durham since 1998. This equates to a conception rate of 45.8 per 1000 girls aged 15-17, which represents a reduction of 15.9% from the 1998 baseline.
- Policies and Strategies to address under 18 conceptions and sexual health should not be dealt with in isolation but be developed holistically within the context of the Joint Strategic Needs Assessment.
- Young people find it difficult to find web sites that provide reliable information and advice on sexual health and contraception and under 18 conceptions. Durham County Council could act as a host website providing links to “trusted” websites which provide advice and information on contraception; sexual health and under 18 conceptions.
- Communication is of vital importance not only in getting the information out there but making sure it is correct. All stakeholders should regularly update and refresh communications to ensure they are up to date and appropriate on all levels. A communications plan would bring together communication policies of all stakeholders to provide a consistent and clear message.
- Although SRE is not compulsory in schools it would be less ambiguous if all schools developed a best practice framework of SRE giving a whole school approach. Communicating with all stakeholders including young people; parents; teachers; and professionals in education and health to devise such a best practice framework. The United Kingdom Youth Parliament survey provided information on what young people want relating to SRE. All local authority maintained secondary schools in County Durham should explore the feasibility of a SRE framework offering:
 - Standardised SRE.
 - Specific qualifications for those who deliver SRE.
 - Curriculum created with confidential student input.

- Timetabled weekly lesson focusing on relationships.
- The level of delivery of SRE policies and procedures in County Durham is inconsistent. Best practice would suggest that all school governors receive refresh training on SRE requirements and ensure that SRE policies and procedures are in place and fit for purpose; and school prospectus includes information on their SRE policy.
- Accessibility for some young people to contraceptive services remains difficult. Utilising the sexual health bus to come into schools over certain periods over certain days may address this. The feasibility of inserting vending machines for condoms into schools that could be used in connection with the C-card scheme could be explored by governing bodies. An important factor would be the cost which may prove to be expensive. However when the costs associated with under 18 conceptions is taken into consideration this could prove to be an 'invest to save' initiative.
- In some areas of County Durham under 18 conceptions is a cultural issue with generations of young women having children in their teenage years. Children and Young People's Services should look at ways of raising the aspirations of this group of people through education and training.
- The branding of emergency contraception is currently not clear and young people may find themselves having to pay for the service as a consequence of this. Durham County Council and the NHS family should work together with young people to ensure that an easily recognisable logo is made available that identifies where emergency contraception is available free of charge.
- It is important that good work such as "Mams to be" programme and other initiatives that support young parents is not lost in the transfer of services when Public Health becomes a function of the Local Authority. Young parents' programmes and projects offer a vital line of support that might not be otherwise available. This support can reduce the need for more targeted support or other local authority interventions which could be much more costly to the public purse. The projects and programmes offered to young parents are in line with the objectives of the Think Family Strategy and are well placed to initiate further help and support if required.
- Following evidence received from Safeguarding and Specialist Services on Child Sexual Exploitation a key finding was for Members of the Council in their role as Corporate Parents to know if there were particular issues within their divisions concerning child sexual exploitation without providing specific details so they could offer assistance for any local initiatives.

Conclusions and Recommendations

2.28 The impact of under 18 conceptions is a wide and enduring one. Its affects can have devastating consequences and it is for this reason that it is important that its causes are recognised and acted upon. Evidence suggests that strategies on under 18 conceptions should not be developed in isolation but be holistic looking

at other social issues such as education; employment; housing; alcohol use and child poverty.

- 2.29 A partnership approach and joint commissioning has enabled gaps in service to be highlighted and acted upon. This good work will continue to be built upon by the use of One Point integrated services which will provide support to young people in one place. This will help to alleviate problems with communication. However, young people have suggested that the County Council provide a web page to links to 'trusted' sites which would support young people by providing advice and information on Contraception and Sexual Health services and Sex and Relationship Education.
- 2.30 Under 18 conceptions rates in County Durham have improved since 1998 and have managed to sustain a downward trend. It is important that this downward trend continues in the future to further improve outcomes for young people to help them to achieve their potential. The figures relating to the end of the Teenage Pregnancy Strategy will not be known until 2012 due to the 14 month data lag in compilation of the statistics. The latest information giving the rolling quarterly average conception rate per 1000 young women aged 15-17, has marginally increased, however, this still remains one of Durham's lowest ever rolling quarterly averages.
- 2.31 Overall communication is an important factor; clear communications are needed between young people, parents, teachers, health professions and commissioners to ensure that young people can make informed choices about their lives; to know what a good relationship should be like; to receive information on what to do and where to go to receive help if needed. For the reasons above communication policies should be renewed and updated regularly to form a communication plan that gives consideration to the methods of communication used, whether they are appropriate to a particular audience and how to communicate with all stakeholders. The involvement of young people in the review and refresh of all communications would ensure 'youth proofing' which would provide an insight as to whether a particular type of message would appeal to young people.
- 2.32 Young people indicated at the Dragons Den event (appendix 6 of the full report), that they found it difficult to find reliable information online and would like a 'safe' site where they could access information in one place with links to trusted sites without trawling through various sites for information. A suitable location for this information page could be within Durham County Council's web-site which could be monitored through Children and Young People's Services.
- 2.33 Young people also indicated that they were not aware of the logo for emergency contraception and were not clear about which pharmacies participated in providing emergency contraception as a free service. Thought is required as to the branding and marketing of the emergency contraception logo to make it easily recognisable to young people of pharmacies that offer this free service. Perhaps young people could be involved in this exercise and this logo could be circulated amongst young people in their Physical Health Social Education /Sex Relationship Education lessons.

Recommendation 1

- a). That Cabinet support the recommendation for the Children's Trust to consider reviewing and refreshing its communications plans with the involvement of young people and in support of young people to enable them to make informed choices about their lives, enabling them to know what a good relationship should be like and to receive information on what to do and where to go to receive help if needed.
- b). That Cabinet suggests that the Children and Young People's Service, possibly through the newly established One Point Service, explores opportunities to host a webpage that will provide links to trusted websites that will give contraception and sexual health information and advice. This will enable young people to access the information from one 'safe' site that is reviewed regularly and managed appropriately. As part of this it should work together with young people to explore the use of other forms of communication, namely social media and text messaging as a means of communicating with young people.
- c). That Durham County Council and the NHS family work together with young people to develop a logo that will be clearly recognisable to young people at pharmacies participating in delivering emergency contraception as a free service.

2.34 Relationships between parents and children are fundamental to the delivery of SRE. Children learn from a young age the importance of relationships whether it is in families, in the classroom or between friends. They learn mutual respect from example of their parents, families, teachers and peers. SRE continues to build on this to highlight what a healthy relationship should be... mutually respectful, trusting and safe. There should be a focus within SRE on the emotional side of relationships giving young people an understanding of their feelings and that of others, how to recognise emotional bullying and the empowerment to say no when they don't feel comfortable in certain situations. Delivery of SRE in schools is as an aspect of 'Think Family' early interventions that help to prevent relationship problems in later life.

2.35 All schools in County Durham deliver SRE, but the level of delivery is inconsistent. Although SRE is not compulsory, a school found not to be delivering it might be heavily criticised by Ofsted. There is not a set model of good practice, however good practice should be based on opinions of young people; parents; teachers and professionals from education and health. A survey carried out by the UK Youth Parliament North East Region asked young people in County Durham a series of questions on SRE delivery in their schools. Approximately 2500 young people responded to the survey and the majority of them asked for standardised SRE in their schools. The results of the survey can be found at appendix 7 of the full report.

2.36 Better delivery of PSHE/SRE in schools may help to reduce the culture of under 18 conceptions which can be generational in some areas. By raising the aspirations of children as to what they can achieve and continuing in this vein throughout their school life may help to address generational under 18 conceptions.

2.37 Child Sexual Exploitation is an important yet hidden issue. A multi-agency approach is vital to addressing the problem and increasing awareness amongst

children and young people to keep safe. Sex and relationship education provides children and young people with information of what a safe healthy relationship should be like with mutual respect and the confidence to say no to things you don't want to do.

Recommendation 2

- a). That Cabinet request that the Children and Young People's Services through Achievement Services, explore the feasibility of a voluntary pilot amongst Durham County Council maintained secondary schools to deliver a best practice sex and relationship framework in their schools and also seek to raise the of aspirations and potential of young people from year 7 through Physical, Social and Health Education (PHSE) and Sex and Relationship Education (SRE). There may be substantial resource implications in this recommendation
- b). That in providing a framework of Sex and Relationship Education (SRE) delivery in secondary schools the results of the UK Youth Parliament Sex Education Survey is promoted:
 - Standardised sex and relationship education
 - Specific qualifications for teachers or health professionals who deliver SRE in schools
 - Curriculum created with confidential student input
 - Regular timetabled lessons offered in classroom settings not assemblies
 - Priority should be given to relationship education which will help to reduce incidents of bullying and teach young people 'how to say no' and the responsibilities that come with sex.

The results of the survey are given in full at appendix 7 of the full report.

- 2.38 School governing bodies can influence how the school delivers SRE and ensure that SRE comes through in all aspects of school life; how relationships between teacher and pupil are conducted; and relationships between pupils. As well as providing information to young people to make them aware of behaviours and emotional relationships.

Recommendation 3

That Cabinet request that the Children and Young People's Service, through Achievement Services encourage school governors to receive refresh training on sex and relationship education (SRE) requirements to ensure that their school policies and procedures relating to SRE are up to date and that the school prospectus include information on their SRE policy. Furthermore, arrangements should be made for copies of the UK Youth Parliament North East Sex Education Survey results to be used in any refresh training.

- 2.39 County Durham and Darlington NHS Foundation Trust have redesigned their services which have improved accessibility but more improvement is necessary to reach young people in rural areas. Greater use of the sexual health bus to provide a contraception and sexual health service in secondary schools, colleges and youth centres in student's own time would help to make these services more accessible to young people living in outlying or rural areas. This is currently being piloted in County Durham and if following evaluation, this is found to be successful it should become part of the mainstream contraception and sexual health service

to young people. There are possible costs associated with this recommendation but when taking into account the cost of under 18 conceptions and any subsequent and associated costs, this solution could be seen as 'invest to save' initiative.

Recommendation 4

That Cabinet support the recommendation for the Children's Trust to commission an evaluation of the Sexual Health Bus pilot in order to determine how successful it has been in reaching young people to provide contraception and sexual health information, advice and guidance to young people. If found to be successful, explore the possibility of becoming part of the mainstream contraception and sexual health service to young people.

- 2.40 Durham County Council and County Durham and Darlington NHS Foundation Trust offer a range of support to Young Parents through programmes and projects such as Family Nurse Partnership; 'Mams to be' and Sure Start's Young Parents Support programme and ABC2 to name but a few. Sure Start offers a wide variety of programmes that provide support to *all* parents. Providing support to young parents may prevent interventions at a later stage, engaging young parents at this early stage in their child's life can create foundations for them to obtain help and support in the future and building the confidence to ask for it. They develop trusting relationships with family workers and health professionals which may provide a valuable safeguarding mechanism in the future. These programmes and projects offered to young parents are underpinned by the County Durham and Darlington Teenage Pregnancy Strategy and Think Family Strategy.
- 2.41 To assess the impact of and progress on its recommendations a systematic review of the recommendation of the report will be considered by the Children and Young People's Overview and Scrutiny Committee six months from the date the report is presented to Cabinet.

Recommendation 5

That a systematic review of this report and progress against its recommendations should be undertaken 6 months after it is considered by Cabinet.