

29th September 2016



County Durham Teenage Pregnancy

Report of Gill O'Neill, Interim Director of Public Health

Purpose of the Report

1. This report is to present the Children and Young Peoples (CYP) Overview and Scrutiny Committee (OSC) with an update on local plans and progress to reduce under 18 conceptions and unplanned teenage pregnancies.
2. Present the Teenage Pregnancy action plan for County Durham 2016 – 2018, and secure commitment from the children and young people's OSC services.

Background

3. Reducing the historically high level of teenage pregnancy continues to be a top priority at both national and local levels. For many teenagers bringing up a child is incredibly difficult and often results in poor outcomes. This includes poor emotional health for the mother and physical health for her and the baby. The reasons for tackling teenage pregnancy and supporting teenage mothers and young fathers are well documented and include health and wider inequalities issues.
4. Steps are needed to ensure that if young people do become parents they get the support they need to make successful futures for themselves and their children, and prevent the poor outcomes that are associated with teenage parenthood, including, poor child health outcomes; poor maternal emotional health and well-being; increased risk of teenage parents and their children living in poverty.
5. The National Teenage Pregnancy Prevention Strategy for England, *The Teenage Pregnancy Strategy: Beyond 2010*¹ highlights the need for focused work in prevention and support. This will ensure that all young people receive the information, advice and support they need and also have access (and know how to use) contraception effectively when they do reach the stage that they become sexually active.
6. OSC conducted a detailed review of under 18 conceptions in 2012, and a Teenage Pregnancy and Teenage Parents Health Needs Assessment (HNA) for County Durham was undertaken in 2014 / 2015. This was to better understand the inequalities within County Durham. Public health worked closely with key partners to undertake the HNA which included:
 - Identification of current evidence base

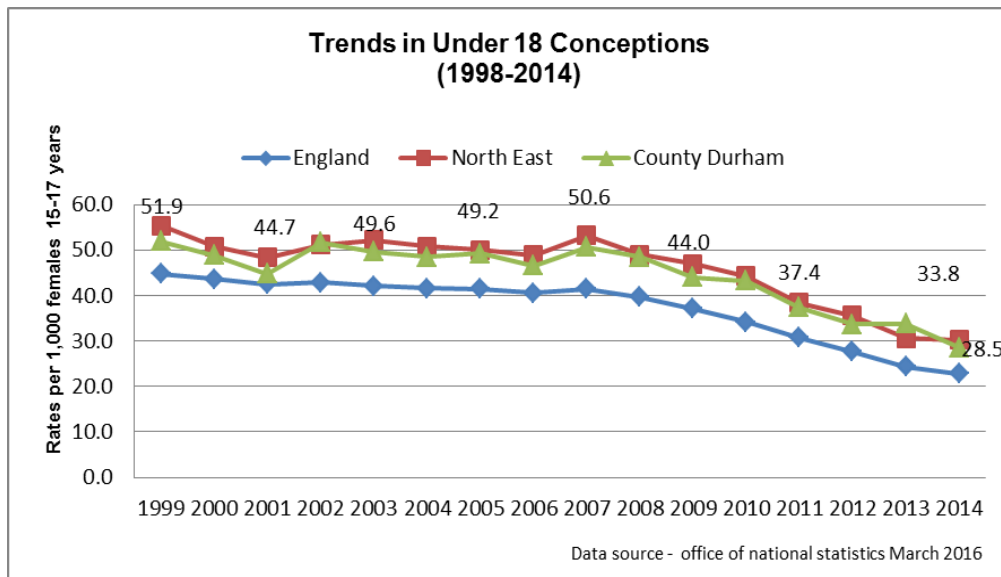
¹ The Teenage Pregnancy Strategy: Beyond 2010

- Collation of baseline data, services, workforce, and information mapping
- Consultations with young people, young parents and other key stakeholders
- Identification of barriers and gaps with current services
- Agree a multi-disciplinary delivery plan that outlines the actions required to reduce teenage conception and provide identified support to young parents and their children.

County Durham Under 18 and Under 16 Conceptions

- Under 18 conception rates in County Durham have been falling over time, but remain significantly worse than England. The distribution of teenage conception rates within County Durham is also unequal and although some wards have made significant improvement, some have remained largely unchanged and other wards under 18 conception rates appear to be increasing and require monitoring.

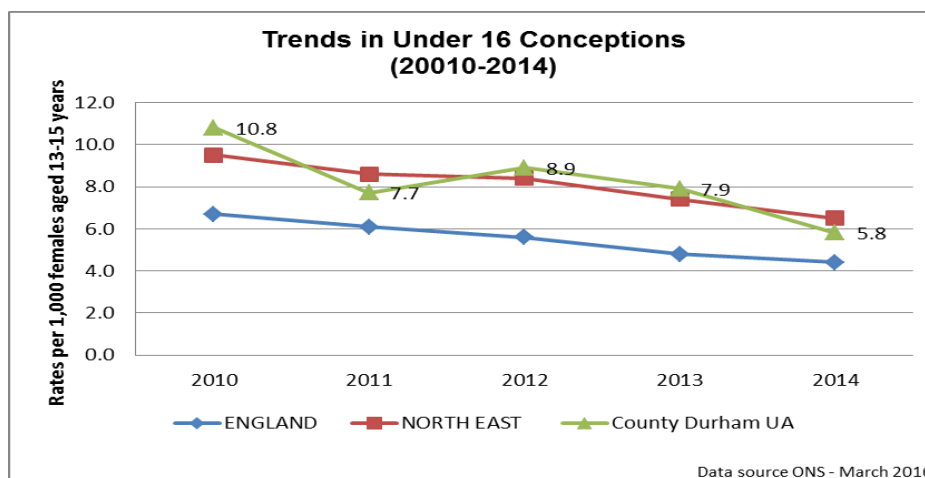
Figure 1: Under 18 conceptions over time, annual rates 1998 to 2014, County Durham, North East and England. Source: Office for National Statistics, 2016.



	1999	2001	2003	2005	2007	2009	2011	2013	2014
Number of U18 conceptions County Durham	469	399	458	456	484	408	324	293	245

- Under 16 conception rates continue falling over time locally, regionally, and nationally. There is limited data available for under 16 conceptions due to the smaller numbers involved, limiting the extent to which it is possible to disaggregate the data. Annual data for under 16 conceptions for top tier local authorities is only available from 2009 onwards and no information is available at sub locality levels. Information is provided on under 16 conception trends on an annual basis and 3 year aggregated. Due to the very small number of conceptions, variance can appear much greater over a short period of time therefore annual figures should be considered with caution.

Figure 2: Under 16 conceptions over time, annual rates 2010-2014, County Durham, North East and England. Source: Office for National Statistics, 2016.



	2010	2011	2012	2013	2014
Number of U16 conceptions County Durham	93	66	76	65	46

Data source ONS March 2016

Recommendations for action

9. It is recognised that no additional funding is available to implement the recommendations and action plan. It is therefore imperative that partners work cohesively through a systems approach and utilise current resources effectively and efficiently to deliver better outcomes for young people. Key recommendations for County Durham were collated into themes which form the key sections for the action plan:
 - Strategic partnership development
 - Prevention: including resilience, Sex and Relationship Education (SRE) and universal services
 - Supporting pregnant teenagers and teenage parents
 - Targeted support
 - Sexual health services: including contraception and Emergency Oral hormonal Contraception (EOHC)
 - Data Improvement
10. The Teenage Pregnancy action plan for County Durham (appendix 2) considers the national teenage pregnancy strategy whilst reflecting local needs identified in the OSC report and the HNA. The multi-agency plan presents a holistic approach throughout and is underpinned with a **resilience building theme** to help protect young people against engagement in risky taking behaviours.
11. The plan is to be delivered over a two year period from 2016 – 2018 and will be monitored and performance managed by the teenage pregnancy partnership board. Public health senior management team and the children

young people and families' partnership board will receive regular progress updates.

12. The voice of CYP and other key stakeholders were fundamental to the development of the action plan. This included consultations relating to SRE from the HNA and the school nursing service review.
13. Marmot principles of proportional universalism have been embedded to help reduce inequalities identified from the HNA with both universal and targeted actions developed. Short term outputs and long term outcome indicators have been included.

Plan for Success – What makes the difference

14. Although the key factors from the national strategy are included in the local action plan, other fundamental elements have been embedded throughout that considers the changing needs of young people. These include:
 - A multi-agency plan that presents a holistic approach throughout
 - Is underpinned with a resilience building theme to help protect young people against engagement in risk taking behaviours
 - Includes targeted service interventions to provide additionality to the universal SRE service to ensure those young people who are at most risk receive appropriate information, advice and support
 - Identified support pathways for teenage parents to reduce the chance of subsequent unplanned conceptions
 - Staff development and upskilling the CYP workforce infrastructure is a key element. This will promote sustainability across services who work with children and young people

15. **Recommendations**

Children and Young People's Overview and Scrutiny Committee is requested to note the information within the update report on teenage conceptions for County Durham.

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Appendix 1: Implications

Finance

No additional funding is required to implement the action plan. It is anticipated that partners work cohesively through a systems approach and utilise current resources effectively and efficiently to deliver better outcomes for young people.

Staffing

No implications.

Risk

No implications.

Equality and Diversity / Public Sector Equality Duty

No negative impacts

Accommodation

No implications.

Crime and Disorder

No implications.

Human Rights

No implications.

Consultation

Consultations undertaken with young people and key stakeholders

Procurement

No implications.

Disability Issues

No implications.

Legal Implications

No implications.

Appendix 2: County Durham Teenage Pregnancy Action Plan 2016-2018

County Durham Teenage Pregnancy Action Plan 2016/2018

1 Key Theme: Strategic Partnership Development

Primary Aim:

Ensure active partnership engagement including the wider determinants of health to reduce under 18 conceptions in County Durham including education, employment, living conditions, social networks, transport and access to services.

No	Objective	Action	Outcome / Measure	Service / Organisation	Lead Officer	Timescale	Update	RAG
1.1	Establish a multi-disciplinary partnership to ensure active engagement including the wider determinants of health	Develop an integrated teenage pregnancy service model for County Durham	Integrated pathways are developed	Teenage pregnancy partnership board	Michelle Baldwin	December 2016		
1.2	Learning opportunities for teenage parents are developed to maximise opportunities for suitable employment, education and training	Map provision delivered through DurhamWorks (YEI) with teenage pregnancy and teenage parents	Trial and evaluate provision under DurhamWorks	DCC/ Adult Learning and Skills Service	Helen Radcliffe / Karen Hudson	July 2016		
1.3	Ensure post 16 delivery partners are aware of available services for young people. This includes prevention of unplanned pregnancies and support for teenage parents	Ensure workforce development is included in ALSS business planning	Improved signposting to services / resources	Improving Progression for Young People (IPYP) IPAG	Linda Bailey	September 2016		
1.4	Develop an integrated vulnerable parent pathway (VPP) ensuring multi-agency working	Develop a vulnerable parent pathway for County Durham	Pathway developed and embedded across County Durham	0-19 service HDFT	Pauline Coglan	December 2016		

	that considers the health and wellbeing needs of the mother, father and child. This includes the wider determinants of health.							
1.5			Audit and review of VPP outcomes	0-19 service HDFT	Pauline Coglan	September 2017		
1.6	Ensure effective and efficient communication with key stakeholders.	Establish a multi-agency group to develop and implement a communications plan with key stakeholders including: <ul style="list-style-type: none"> • CYP • DCC Housing / employment • DurhamWorks • Health / midwifery • Schools / education • CVS • One Point • AAPs • GP practices 	Service user feedback is obtained to improve and develop services that are: <ul style="list-style-type: none"> • Fit for purpose • young people friendly • accessible • Quality assured 	Teenage pregnancy partnership Board	Michelle Baldwin / Karen Stewart	March 2017		
1.7	Learning opportunities and good practice are included to help shape future services for young people.	Promote active engagement with the teenage pregnancy knowledge exchange and Sex Education Forum	Sharing of best practice is standardised within the teenage pregnancy partnership terms of reference	Teenage pregnancy Partnership board	Michelle Baldwin	September 2016		

2 Key Theme: Prevention, including resilience, SRE and universal services

Primary Aim:

Ensure the commissioning and provision of quality assured services. Use a life course approach for young people including a pathway of age appropriate sex and relationship education and a range of services to help build resilience to protect against engagement in risky health behaviours.

No	Objective	Action	Outcome	Service / Organisation	Lead Officer	Timescale	Update	RAG
2.1	To upskill the CYP workforce to be confident in addressing SRE issues confidently and signpost to relevant services.	Undertake a SRE and Sexual health training needs analysis for professionals working with CYP including: <ul style="list-style-type: none"> • Lifeline • Schools • School nurses • YOS • VCS orgs • DCC Children's services • CCGs / GPs 	Development of an SRE and sexual health training plan that is informed by workforce need.	Teenage pregnancy partnership board Task and finish group	Michelle Baldwin	March 2017		
2.2		SRE workforce development to include 'delay training' for professionals working with young people including LAC / care leavers, mainstream and alternative education providers	Staff are more confident to discuss SRE and signpost to appropriate services	DCC Education	Liz Kippax	March 2017		

2.3		Undertake scoping exercise to identify potential to integrate core elements of universal delivery for risk taking behaviours (RTB) for SRE, alcohol, drugs	Core elements of RTB are integrated into delivery programmes including the impact of alcohol / drugs on decision making and unprotected sex	Public Health	Michelle Baldwin / Jane Sunter	December 2016		
2.4	Improve and sustain the quality of SRE provision for children and young people in schools.	Deliver the two year (2015 – 2017) commissioned SRE project to improve the quality of SRE in secondary schools To work in schools in locations with persistently high teenage conception rates.	Increased understanding of SRE within schools by staff.	DCC Education	Liz Kippax / Michael Lamb	Quarterly update		
2.5			Staff are more confident to discuss SRE and signpost to appropriate services to reduce U18 conceptions					
2.6			Schools have a robust SRE policy in place that reflects the needs of the student population					
2.7			Each identified school has a planned programme of SRE in place					
2.8		Support schools in identifying and quality assuring external support and resources for SRE and its use in schools.	Schools are made aware of 'good practice guidance' to manage risk taking behaviours	DCC Education	Alison Young	September 2016		

2.9			Promote the sex education forum quality standards for SRE through PSHE forum and DCC extranet.	DCC Education	Alison Young	September 2016		
2.10			Schools are supported to achieve the D of E PSHE quality Mark when it is established	DCC Education	Alison Young	September 2017		
2.11		Explore DurhamWorks as a vehicle to raise awareness of SRE and SH services for young people	Provider services are more confident to discuss SRE and signpost to appropriate services	DCC / Adult Learning and Skills Service	Karen Hudson	September 2016		
2.12	To increase the resilience of CYP to help protect them against engagement in risky health behaviours.	Roll out Young Minds resilience programme to schools	Evaluation on the process and impact of the Young Minds programme to inform future service delivery	Public health / Brighton University	Michelle Baldwin	December 2016		
2.13		One Point Wellbeing for Life workers to include SRE messages in their group and 1:1 work with young people and parents.	Increase opportunities to deliver SRE information to young people and parents. Increase young people and parents knowledge and skills in SRE	DCC One Point	Karen Davison			
2.14	Young people , parents and carers have access to age appropriate SRE information and service provision	Active promotion of the services offered by the school nursing service.	Increased uptake of school nurse services for advice on alcohol / sexual health / smoking / drugs.	0-19 service HDFT	Jane Birtley	September 2016 / 2017 / 2018		

2.15			School nurses issue secondary school pupils with 'welcome postcards' with identifies links to services.	0-19 service HDFT	Jane Birtley	September 2016 / 2017 / 2018		
2.16		Scope the potential for online service access / you tube / text messaging services / social media / Interactive lessons and toolkits	Undertake a feasibility study to inform future service improvement to improve information access	TP partnership board	Michelle Baldwin	March 2017		
2.17	Support schools to develop and implement suitable targeted campaigns relating to SRE	Scope and promote the development of a social norms marketing programme with secondary school year 8 pupils relating to SRE / risk taking behaviour.	Business plan developed to undertake social norms marketing campaign	Public Health	Michelle Baldwin	September 2016		
2.18			Schools implement social norms marketing campaign	Public Health	Michelle Baldwin	March 2017		
2.19			Reduction of teenage conceptions in persistent hotspot areas	Public Health / education / HDFT	Michelle Baldwin	December 2018		
2.20	School children receive age appropriate school based SRE and health and life skills through a progressive curriculum	Specific topic areas offered will include: Relationships & Sexual health: puberty, contraception, STIs, accessing services with confidence	Increased knowledge and understanding of SRE and sexual health identified through pre and post survey	0-19 service HDFT	Jane Birtley	September 2016 / 2017 / 2018		

2.21		Specific sessions to support life skills including decision making, managing peer pressure and risk taking behaviours such as alcohol, drugs and smoking will be covered through resilience building work	Young people feel more confident in managing risk taking behaviours	0-19 service HDFT	Jane Birtley	September 2016 / 2017 / 2018		
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3 Key Theme: Supporting pregnant teenagers and teenage parents

Primary Aim:

To establish a multi-agency core offer for pregnant teenagers and young parents based on assessed need, including health, housing, finance and education / training and employment opportunities and ensure connection to vulnerable parent pathway

No	Objective	Action	Outcome	Service / Organisation	Lead Officer	Timescale	Update	RAG
3.1	Ensure all pregnant teenagers receive positive and appropriate holistic support.	Continue to engage with CDDFT midwifery team to support pregnant teenagers on the teen mother pathway	Pregnant teenagers receive additional support during pregnancy.	CDDFT / HDFT	Alison Metters	September 2016		
3.2			Robust pathways between midwifery care and health visitor are developed.	CDDFT / HDFT	Alison Metters Pauline Coglán	June 2017		
3.3		Antenatal assessment by HV to identify level of support required.	Teenage parents feel supported with health, social and educational needs.	0-19 service HDFT	Pauline Coglán	March 2017		
3.4			All teenage parents identified as meeting the vulnerable parent pathway criteria, receive additional support	0-19 service HDFT	Pauline Coglán	Quarterly reporting		

3.5			Audit of outcomes for teenage parents engaged on the vulnerable parent pathway.	0-19 service HDFT	Pauline Coglan	June 2017		
3.6		A stronger families nomination is completed where necessary	Increased teenage parent nominations into Stronger families programme for improved holistic support	0-19 service HDFT / DCC	Pauline Coglan / Karen Davison	Quarterly update		
3.7	Teenage mothers and fathers are supported within their communities	Community teenage parent support programme is delivered in 5 localities across County Durham	Improved Social and Emotional capabilities (SEC) outcomes for teen parents	DCC One Point	Chris Peverall	September 2016 and post programme delivery thereafter		
3.8			Improved parenting skills reported by young parents	DCC One Point	Chris Peverall	September 2016 and post programme delivery		
3.9			Progression pathways identified for all parents engaged in young parent support programmes	DCC One Point	Chris Peverall	September 2016 and post programme delivery		
3.10			Steering groups are established in five localities to promote service integration	Terms of reference are established and lessons learned shared	DCC One Point	Chris Peverall	June 2016	

3.11		One point centres and Children's centres to provide targeted support programmes and promote active engagement opportunities for young parents	Programmes promoted in local areas	DCC One Point	Chris Peverall	March 2017 / 2018		
3.12	A multi-agency core offer is developed to inform professionals what support is available for pregnant teenagers and teenage parents.	Information is collated to provide easy access to information on: <ul style="list-style-type: none"> • Housing • Education • Employment • Finance • Health (physical and mental health) 	Standardised and consistent universal offer for County Durham is produced.	DCC Family Information Service	Karen Stewart / Karen Davison	December 2016		
3.13	Teenage mothers and fathers are supported into education, employment or training	Engagement activities are created within DurhamWorks to support teenage mothers and fathers to progress towards employment, education or training	Increased levels of engagement in positive progression activities	DCC/Adult Learning and Skills Service	Helen Radcliffe/ Karen Hudson	July 2016		
3.14		All young mothers and fathers are offered support from a One Point personal advisor	Reduction in teenage mothers identified as not in education, employment or training (recording period Nov – Jan)	One Point	Chris Peverall	February 2016		

4. Key Theme: Targeted support

Primary Aim:

To ensure targeted interventions are provided for young people at greatest risk of under-18 conceptions to reduce unplanned conceptions

No	Objective	Action	Outcome	Service / Organisation	Lead Officer	Timescale	Update	RAG
4.1	Commission targeted support to improve education and employment opportunities for both teenage mothers and fathers	Identify gaps in targeted support and progression opportunities which could be filled through the DurhamWorks programme	Increase in the number of support and progression opportunities delivered within DurhamWorks where gaps have been identified.	DCC/Adult Learning and Skills Service	Helen Radcliffe / Mel Horner	December 2016		
4.2		Teen Parent support programme to be expanded under DurhamWorks	Increase in the number of teen parents engaged in DurhamWorks	DCC/Adult Learning and Skills Service	Helen Radcliffe / Karen Hudson	March 2017		
4.3	Work in partnership to ensure Looked after children (LAC) and Care leavers (CL) receive appropriate SRE that meets their needs	Undertake consultations with young people who are LAC and CL to identify SRE needs	Gap analysis of SRE needs	DCC - LAC	Gill Palin	December 2016		
4.4		Ensure all LAC and CL receive suitable SRE information and support	Downward trend of LAC / carer leavers teenage conceptions	DCC education / DCC LAC	Gill Palin / Alison Young	March 2017		

4.5		Scope the potential of developing a peer support programme for CL	Peer support programme pilot commenced if agreed	DCC education / DCC LAC	Gill Palin / Alison Young	December 2016		
4.6	Increase the capacity within the school system to support young people who are at increased risk of teenage pregnancy	Embed primary mental health nurses into the school systems via the 0-19 service	Young people are more confident to access service	0-19 service HDFT	Jane Birtley	September 2016		
4.7	Young fathers are offered targeted supported	Undertake consultations to identify the specific needs of young fathers	Young fathers are offered support based on identified needs within their community	Public health VCS	Michelle Baldwin	September 2017		
4.8	Young people post 16, have access to information and services to reduce the risks of unplanned conceptions	Ensure colleges and 6 th form education establishments have accurate and appropriate information to signpost student to quality services including SRE / sexual health	Increased trend in access to CaSH services and C-card registrations	0-19 service HDFT	Jane Birtley	Minimum annual September 2016 / 2017 / 2018		

5. Key Theme: Sexual health and contraception services

Primary Aim:

Contraceptive and sexual health services continue to use a collaborative approach between the NHS and Local Authorities. This will form an effective sexual health system to provide young people with access to contraception when they need it.

No	Objective	Action	Outcome	Service / Organisation	Lead Officer	Timescale	Update	RAG
5.1	Maintain a collaborative approach to ensure an effective sexual health system which meets the needs of young people	Undertake a Health Equity Audit of sexual health services in County Durham to ensure fair and equitable access to sexual health services	Review services to ensure identified gaps in service access are addressed	Public health Sexual Health Service / CDDFT	Tammy Ross Ruth Robson	March 2017		
5.2		Actively promote C-Card registration and CaSH services	Maintain trend in registration and access to CaSH and C-Card services	Public health Sexual Health Service / CDDFT	Tammy Ross Ruth Robson	September 2016 / annual		
5.3		Work collaboratively with GPs / practice nurses to promote CaSH / C-card services in primary care	Promote access to contraception services within primary care	Public Health	Tammy Ross	September 2016 / annual		
5.3	To understand EOHC use and LARC uptake within County Durham and correlation to localities with consistently high under 18 conception rates.	Undertake a review of EOHC use for U18 and U16 to identify any correlation with LARC uptake and under 18 conceptions	Improved planning of targeted service delivery to reduce under 18 conceptions in areas of high conception and EHOc use	Public Health	Tammy Ross	December 2016		

6. Key Theme: Data and information

Primary Aim:

To collect accurate and timely data and information about vulnerable young people including (although not exclusively) teenage parents including young fathers, pregnant teenagers, care leavers and young carers to improve service planning

No	Objective	Action	Outcome	Service / Organisation	Lead Officer	Timescale	Update	RAG
6.1	Appropriate services are aware of all teenage mothers in statutory education	Review the communications policy(s) for CDDFT / HDFT / DCC to identify current barriers	Data sharing agreement and pathways are established between midwifery services, school nurse service and the education health needs team	HDFT / CDDFT (midwifery)	Pauline Coglan / Alison Metters	September 2017		
6.2			Appropriate holistic package of support is available to all parents in schools	HDFT / CDDFT (midwifery)	Pauline Coglan	September 2016		