

**North East Lincolnshire CCG**

Attachment 14b)

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| **Report to:** | NEL CCG Partnership Board |
| **Presented by:** | For information paper |
| **Date of Meeting:** | 10 July 2014 |
| **Subject:** | Teenage Pregnancy update |
| **Status:** | OPEN  CLOSED |
| **Agenda Section:** | STRATEGY  COMMISSIONING OPERATIONAL ISSUES |

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| **OBJECT OF REPORT** |  |
| Update on an action from previous meeting A query was raised over the reasons behind the drop in the teenage pregnancy rate as this has been a challenge for at least the last decade. Whilst there is a belief it is due in part to the concerted efforts that have been put in place for a number of years it was agreed further information should be provided as to how the improvement has been achieved. Isobel Duckworth was asked to investigate further and report the findings back to a future Board | |

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| **STRATEGY** |  |
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| **IMPLICATIONS** |  |
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| **RECOMMENDATIONS (R) AND ACTIONS (A) FOR AGREEMENT** | | |
|  | To note the information  To review progress in a year | **Agreed?** |
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|  |  | **Yes/No** | **Comments** |
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|  | Does the document take account of and meet the requirements of the following: |  |  |
| i) | Mental Capacity Act | Y |  |
| ii) | CCG Equality Impact Assessment | Y |  |
| iii) | Human Rights Act 1998 | Y |  |
| iv) | Health and Safety at Work Act 1974 | Y |  |
| v) | Freedom of Information Act 2000 / Data Protection Act 1998 | Y |  |
| iv) | Does the report have regard of the principles and values of the NHS Constitution?  [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\_113613](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_113613) | Y |  |

**Background**

In the last partnership meeting there had been a discussion over the reasons behind the drop in the teenage pregnancy rate as this has been a challenge for at least the last decade. Whilst there is a belief it is due in part to the concerted efforts that have been put in place for a number of years it was agreed further information should be provided as to how the improvement has been achieved. This update provides some information.

Conceptions statistics include pregnancies that result in:

* One or more live or still births (a maternity)
* A legal abortion under the Abortion Act 1967 (an abortion)

They do not include miscarriages or illegal abortion.

Data is based on birth registration so the statistics are published at least 14 months after the end of the period to which they relate. Abortion data does not follow the same timescale and is timelier. The recent published data on under 18 year conceptions covers March 2011- March 2013. The last abortion data was released in June 2014 for abortions carried out during 2013.

**What works**

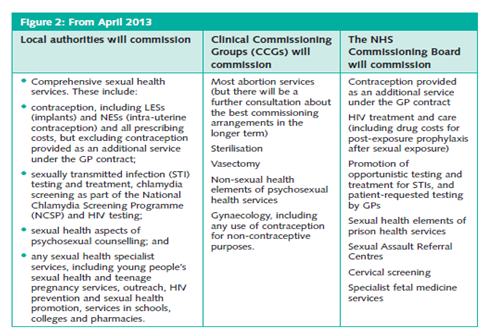
Nationally what works to reduce teenage pregnancy includes:

* Comprehensive sex and relationship education in and out of school
* Easy access to young people centred contraception and sexual health services (which include access and use of LARC- long acting reversible contraception as per NICE Clinical Guidance 30 (2005)

**Commissioning arrangements for sexual health**

The national and local Infrastructure and services during the related time period of the data (March 2011-March 2013) have changed including a new framework for sexual health (March 2013). This now covers a range of commissioners and providers. This table below shows the different commissioning arrangements post April 2013.

Table 1: The commissioners for sexual health services from April 2013



From A Framework for Sexual Health March 2013 (note- NHS Commissioning Board is now called NHS England)

**Local services/partnership**

In NEL we now have a local sexual health partnership board covering all the main commissioners identified in table 1 above who review the wider range of outcomes for sexual health.

The providers of the services have also changed. For example most of the secondary schools and a high proportion of primary schools are or will be academies. This could affect the type and quality of the sex and relationship education provided. This is difficult to monitor directly.

However since April 2013 the current provision of LARC ,for availability of access and choice, remains through GP practices as well as the main sexual health provider- Virgin Care. Virgin Care also provide outreach services including colleges. In additional sexual health support through pharmacies (such as pregnancy testing, accessing to emergency hormone contraception and condom provision ) remains the same.

GPs also continue to provide contraception as an additional service under the GP contract.

The abortion providers commissioned through the CCG include a requirement that contraception is discussed ( and provided where necessary) before the women leaves the service.

Across NL and NEL we have the Family Nurse Programme in place commissioned by NHS England which supports first time mothers under 20 years of age- one of the programmes outcomes is to reduce /delay subsequent pregnancies.

**Discussion**

There are a range of services in place that support the reduction of teenage conceptions and there has been a steady fall locally as well as nationally. Both nationally and locally it is very difficult to identify one main factor which might have supported the decline. With the change in commissioners and providers both nationally and locally we need to continue to ensure services are commissioned and provided universally but also targeted to those at greatest need. We need to continue to monitor the data quarterly and report after a full year therefore the recommendation would be to review in detail teenage conceptions including abortions in a year.