

Report of: Neighbourhood Renewal Business Manager

To: Executive Board

Date: 14th May 2007 Item No:

Title of Report : Family Planning Services in Oxford

pose of report: To consider the recommendations from Council regarding

the Family Planning Service and cuts to clinic sessions in Oxford

Key decision: No

Portfolio Holder: Cllr Caroline Van Zyl

Scrutiny Responsibility: Oxford City Health Overview Scrutiny

Committee

Ward(s) affected: All

port Approved by: Michael Lawrence, Strategic Director Housing, Health

and Communities

Jeremy Thomas, Head of Legal and Democratic Services

Andy Collett, Group Accountant

Cllr Caroline van Zyl, Portfolio Holder

Policy Framework: N/A

Recommendation(s):

1. To note the developments that have taken place within the family planning services.

2. To note that a report was tabled at the Health Scrutiny Committee on 26th April, providing an update on the Sexual Health Strategy.





Background

- 1. At a meeting of Council on 20th November it was noted the Primary Care Trust decision in October 2006 to:
 - a) reduce the Alec Turnbull Clinic sessions due to clinical risk issues and budget restraints. (2 evening clinics were cut);
 - b) the decision to locate the clinic in Raglan House (Temple Cowley) after a temporary stay in Blackbird Leys.
- 2. Council resolved to:
- 3. Ask the Executive to look into ways of developing a sensible joint strategy with the new PCT, on an urgent basis, to address family planning issues, especially targeted towards deprived, hard to reach groups.
- 4. To ask the Chief Executive of the Council to write to the Chief Executive of the PCT to:
 - a) Ask her to respond to the Council's concern that reductions in clinic sessions could have on unwanted pregnancies, especially teenage pregnancies;
 - b) Accept that further changes be discussed with the City Council bodies to ensure risk is reduced to vulnerable women and families:
 - c) Ask the Chief Executive of the new PCT to explain the rationale for the potential location of the Alec Turnbull Clinic at Raglan House rather than the new East Oxford Health Centre.
- 5. This report provides an update on the most recent position.

Report to Oxfordshire Primary Care Trust Sexual Health and Scrutiny Forum in January 2007.

6. In January a report was submitted to the Oxfordshire Primary Care Trust Sexual Health and Scrutiny Forum. This report is set out in Annex 1 and the notes of the meeting are provided in Annex 2. A summary is provided below.

Family Planning Service

- 7. The report sets out the reasons for reducing the Alec Turnbull Clinic sessions and proposals for future arrangements. These include the reinstatement of services in April 2002.
- 8. It was explained at the meeting that issues such as areas of deprivation, difficulties of access and remoteness inform their service plans. The service is currently looking at all clinics across the county to ensure that they are positioned in the correct places, that they are open at the right time and that they offer the right service for the right age groups.

9. It was agreed that the service should submit a report to the next County Council joint Overview & Scrutiny Committee to summarise the impact of recent changes.

GUM (Genito Urinary Medicine) Service

- 10. The report highlighted that a key issue was the relocation of the Oxford clinic to its new location on the Churchill Hospital site. Building works on the new premises were still not fully complete but clinics are up and running. The new location was discussed. It was suggested that it may benefit the more deprived areas of Wood Farm and Barton but may be less accessible for other areas/populations and that service data would be monitored to assess this.
- 11. Another immediate pressure on the service is achieving the 48 hour access target. The service needs to achieve an interim target of seeing 60% of patients within 48hrs of contacting the service by mid February.
- 12. It was agreed that the service should submit a report to the County Council Joint Overview & Scrutiny Committee to feedback on these issues at their next meeting.

New PCT Sexual Health Commissioning Strategy

- 13. In addition the PCT is in the process of revising and updating the County Sexual Health and HIV Strategy. This will inform a new Sexual Health Service Commissioning Strategy that will ensure the PCT is purchasing services that best meet the needs of the local population.
- 14. A report was on the agenda of the Oxford City Health Scrutiny Committee, on 26th April 2007, providing an update on these reviews. The Draft Oxfordshire Sexual Health Strategy and Action Plan is due to be finalised in May 2008. The Committee is asked to nominate two representatives to attend future meetings of the Forum and to indicate whether it would like to comment upon the Sexual Health Strategy at its next meeting

Teenage Pregnancies

- 15. In January 2007 the Oxfordshire Children and Young People's Board reviewed ongoing work to minimise teenage pregnancies. Areas for further development were identified as follows:
 - a) greater integration of work and services targeted to teenage pregnancy and young people's sexual health;
 - b) further development of contraceptive services for young people;
 - c) greater targeted support to high risk groups and wards with the highest teenage pregnancy rates;
 - d) Providing clearer support and guidance for head teachers and governors.
- 16. Following the meetings of the Children and Young People's Board meeting it has been agreed that the County Council work in partnership with the PCT to develop a Joint Commissioning Strategy for Teenage Pregnancy and Young Peoples Sexual Health,

covering young people up to the age of 19 years old. This will be available for consultation with stakeholders (including District Councils) in July 2007 in preparation for reporting to the Children and Young People's Board in September 2007.

Conclusions

- 17. The County Council and PCT are working in partnership to develop new commissioning plans for sexual health, including family planning and GUM Services. Stakeholders. Oxford City Council will be consulted and can be involved in this process.
- 18. The City Council is represented on the Children and Young People's Partnership and Board and will have an opportunity to influence the Teenage Pregnancies Strategy and Commissioning Plan through this process.

Background papers:

Oxford City Council Minutes 20th November 2006

Report author

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Report to Overview and Scrutiny Committee January 2007

Background

As a way to manage the financial resources appropriately and to delivery a safe and effective service it was decided to close three clinics. This proposal allowed staff to be freed up and give some flexibility to cover annual leave and study / training days. This was an interim measure until March 2007.

Clinic Closures

The clinics closed were:

- Thursday evening clinic at Alec Turnbull (4.00-7.30 pm)
- Friday evening clinic at Alec Turnbull (4.00-7.30 pm)

Clinics were closed on 16th October 2006.

Originally Thame peripheral clinic was proposed but due to some HR issues closure of this clinic would not provide the flexibility that was needed and therefore remained open.

Current Situation

The result has been that staff were redeployed to cover vacancies and leave and therefore the reliance on locum cover has significantly dropped. There was a surplus of staff on some days that allowed more flexibility across the week and cover for annual leave. The service has had to rely on locums in periods of high annual leave demand.

Impact on client numbers

This is difficult to assess as the service has relocated and numbers of clients have reduced due to this.

Although two clinics were closed the service commenced a domiciliary outreach project aimed at preventing teenage pregnant women having a second pregnancy.

Financial

Although the family planning budget is still in arrears it is not on the scale of last year.

Future

The clinics are due to reopen the first week of April 2007.

It is proposed that Friday clinic remains closed for the following reasons:

- Attendances per clinic are very low (on average less than 10 clients over 3 hours)
- Difficult to recruit staff for Friday evenings
- Young people attending Friday clinic has always been low
- Extra staff could be available for Saturday when service is used by more young people as well as working women.

Therefore it is proposed that only the Thursday clinic is reopened.

The service is currently looking at all clinics across county with the aim of making the service more accessible to young people. This may mean changing days or times of clinic

provision. It is suggested that surveys will be carried out along with full publicity and communication strategy before any change in service.

The service is undertaking a review of its current service provision with the aim of prioritising areas of work; this may lead to a change in how services are delivered. Further discussion and eventually a full consultation will occur prior to major service change.

Lucia Winrow, Business Manager Jackie Adams, Transition Director, Children and Family Planning Services

Family Planning, GUM and Scrutiny Meeting

Notes of meeting held on 31st January 2007

Present: Paula Jackson, Lucia Winrow, Cynthia Harper, Anne Edwards, Caroline Landon, Christine Etheridge, Dinah Perkins, Mary Judge, Patricia Miller, Roger Edwards, Harry Dickinson, Julia Woodman, Zoe Patrick, Paul Stuck, Jay Bagaria (SpR trainee), Christine Jones (notes)

Apologies: Val Messenger, Joe McManners, Gill Walton

Welcome and Introductions

Those present were welcomed and asked to introduced themselves – see attached list.

Paula informed the group that as a result of PCT reorganisation, Val Messenger will now chair the group. Val has been appointed to the post of Consultant in Health Improvement and her portfolio includes sexual health services.

This meeting was chaired by Paula in Val's absence.

Notes of Last Meeting

Paula recapped on the notes of the previous meeting:

- The majority of key issues cited in October 2006 are still on-going.
- The list of strategic commissioning issues (long-term issues) and list of specific service delivery issues (more immediate issues) will inform discussions around agreeing a single programme for scrutiny and consultation.

Purpose of Meeting

Key aims of the meeting are:

- Agree priorities for a single programme for scrutiny and consultation.
- Receive feedback from the family planning service regarding service changes and future plans.
 These were due to be discussed at a separate meeting with health scrutiny which has now been included on this meetings agenda.

Recent Changes to Scrutiny Committees

Roger summarised recent changes to scrutiny committees. The health scrutiny function remains with the county council Joint Overview & Scrutiny Committee whilst the 3 locality sub-groups have been abolished. The county council also intends to establish a new Public Health Scrutiny Group which will have small task groups reporting to it.

Julia highlighted that the city council intendeds to re-establish a city health scrutiny committee and work is currently being undertaken to finalise these plans.

Paula emphasised that the PCT would wish to continue to work in partnership with the councils on a single programme of scrutiny and consultation regarding sexual health services.

Family Planning Service Update

Lucia tabled a report which summarised service changes and future plans (see attached).

The key issue related to two clinic closures in October. The service tabled a proposal to re-open the Thursday clinic but to keep the Friday evening clinic closed and instead expand their Saturday morning clinic. This proposal was accepted by the group as an acceptable way forward as it would enable the service to target their limited resource most effectively to meet local needs.

The group was keen to understand the impact of service changes, particularly the recent relocation on attendances. Lucia informed the meeting that it was likely that attendance and demand will change again once the move to Raglan house takes place. At that time, the service will be re-assessed so that it can respond to change.

It was agreed that the service should submit a report to the county council Joint Overview & Scrutiny Committee to summarise the impact of recent changes.

Lucia explained that issues such as areas of deprivation, difficulties of access and remoteness inform their service plans. The service is currently looking at all clinics across the county to ensure that they are positioned in the correct places, that they are open at the right time and that they offer the right service for the right age groups.

Action: Family planning service to submit a report to the Scrutiny Committee meeting scheduled for November 15th.

GUM Service Update

Anne tabled a report summarising current issues (see attached).

Anne highlighted that a key issue was the relocation of the Oxford clinic to its new location on the Churchill Hospital site a week ago. Building works on the new premises are still not fully complete but clinics are up and running. Supplementary services provided in Banbury during transition were well attended. The new location of the unit has not led to a drop in attendance figures and a new drop-in clinic ('Mini-check') attracts 10-15 patients daily. The new location was discussed. Anne suggested that it may benefit the more deprived areas of Wood Farm and Barton but may be less accessible for other areas/populations and that service data would be monitored to assess this.

Anne stated that the other immediate pressure on the service is achieving the 48 hour access target. The service needs to achieve an interim target of seeing 60% of patients within 48hrs of contacting the service by mid February.

Again the group was keen to understand the impact of service changes on attendance figures and performance against the 48hr target. It was agreed that the service should submit a report to the county council Joint Overview & Scrutiny Committee to feedback on these issues at their next meeting.

Action: GUM service to submit a report to the Scrutiny Committee meeting scheduled for November 15th.

PCT Commissioning of Sexual Health Services

Paula stated that the PCT is currently reviewing and revising the County Sexual Health & HIV Strategy which was last issued in 2004, this work is being undertaken by Jay on behalf of the public health team. Jay will be reviewing the counties sexual health profile and our performance against national targets. It is anticipated that a draft version of the new strategy will be available by the end of March and Paula suggested that the PCT would wish to consult this group as part of the consultation process to receive feedback on the draft document.

A recent sexual heath report published by the South East Public Health Observatory was highlighted by Mary who asked if similar information was available for Oxfordshire. Paula advised that some of the data included in the report is available at locality level and will be assessed during the revision of the sexual health strategy.

Paula said that once the strategy and key priorities are finalised the PCT will then be able to develop a new sexual health commissioning strategy. The purpose of this work will be to ensure the PCT is investing in services which best meet the sexual health needs of the counties population. This may mean that there could be changes to the way some services are currently commissioned and provided in the future and the PCT would consider this forum to play a key role in this process.

Action: the PCT will forward a draft copy of the revised sexual health strategy to group members

A Single Programme for Scrutiny and Consultation

The group considered the list of strategic commissioning issues (long-term issues) and list of specific service delivery issues (more immediate issues) developed at the previous meeting. It was agreed that some of these issues had already been resolved or are currently being addressed. Paula proposed that all outstanding issues would be addressed as part of the process for revising the sexual health strategy and developing a commissioning strategy.

Some of the challenges related to involving patients and the public in relation to sexual health services were discussed. Paula stated that this would feature as a key strand in the sexual health and commissioning strategies and the PPI forums would need to be closely linked with this aspect of the work programme.

It was agreed that the groups work programme for 2007 focused on:

- Monitoring the impact of GUM and Family Planning service changes to be reported to the Health Scrutiny Committee in November.
- Informing the revision of the sexual health strategy and development of a new commissioning strategy.

Paula requested that Scrutiny Committee members inform Family planning & GUM services of any specific requests regarding information they would wish to see included in good time before the reports are finalised in the autumn.

The group agreed to reconvene in September to allow sufficient time for the impact of GUM and Family Planning services changes to be assessed.

Date & Time of Next Meeting

Wednesday 5th September 2007 between 3-5pm in Conference Room A at Jubilee House

Christine Jones

5th February 2007