

Sexual Health Services: Proposal for a young persons health and wellbeing centre

Youth Adviser and YIAG workshop

January 2015

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1. Introduction

On 7th January 2015 seven young people took part in a discussion with the Local Authority Public Health team around proposals for a young people specific sexual health service in the borough. This report is a write up of those discussions, reflecting the comments and views expressed by young people on that day.

Healthwatch Waltham Forest worked with the boroughs Young Advisers and Youth Independent Advisory Group to bring people together for that discussion.

The purpose of the session was to build on previous engagement of young people in sexual health commissioning, explore thoughts and views around some specifics of the proposed service, and gain information which could help feed into service specification documentation and the overall commissioning process.

2. Background

The London Borough of Waltham Forest is in the process of developing a commissioning model for how sexual health services are delivered in the borough.

Current contracts for Waltham Forest's sexual health services finish at the end of October 2015.

Following an initial review of sexual and reproductive health services in Waltham Forest in 2013, a number of recommendations were identified. The report, published in September 2013, described in full the sexual and reproductive health needs and services in Waltham Forest, identified gaps, and reflected on the strengths, weaknesses and opportunities for improvement.

During 2014, in the context of its 'Redefining Waltham Forest', structural programme the borough conducted a further review of sexual health in late 2014:

"This short and focused review took place to enable successful and timely recommissioning of these sexual health services in line with the recommendations agreed in 2013. The review researched and proposed a range of options for consideration by the Council to achieve the best outcomes for service users and ensure value for money moving forwards."

One of these options involves establishing a young person sexual health and substance misuse service, with the possibility of expanding to an overall health and wellbeing service for young people.

Healthwatch Waltham Forest were asked to facilitate the bringing together of a group of young people to discuss this option.

What is Healthwatch?

Healthwatch Waltham Forest is a local Healthwatch organisation, established by the Health and Social Care Act 2012 to act as local independent consumer champions for health and social care.

Local Healthwatch organisations have statutory duties to:

- Gather the views and experiences of patients and public.
- Make those views known to providers and commissioners.
- Promote and support the involvement of people in the commissioning and provision of local care services and how they are scrutinised.
- Recommend investigation or special review of services via Healthwatch England or directly to the Care Quality Commission (CQC).
- Provide information and signposting about access to services and support for making informed choices including independent advocacy support to make an NHS complaint.
- Make the views and experiences of people known to Healthwatch England, providing a steer to help it carry out its role as national champion.

What are the Young Advisers and Youth Independent Advisory group (IAG)?

Waltham Forest council has three main youth engagement and advisory groups. The Young Advisers and Youth IAG are two of these groups. Both are made up of young people who are trained and qualified to advise national and local government, statutory agencies such as the police, charities and other non-government organisations on how to engage with young people. They have been trained in how to carry out research in their community and can offer advice and training on how to handle issues with young people. In the past they have (and continue to be) very active around different aspects of health and wellbeing for young people in Waltham Forest, working around sexual health services, mental health and others in the past year. For more information on these groups please visit the council [website](#) or contact Jane Brueseke, Youth Engagement & Participation worker (Jane.Brueseke@walthamforest.gov.uk).

3. Attendees

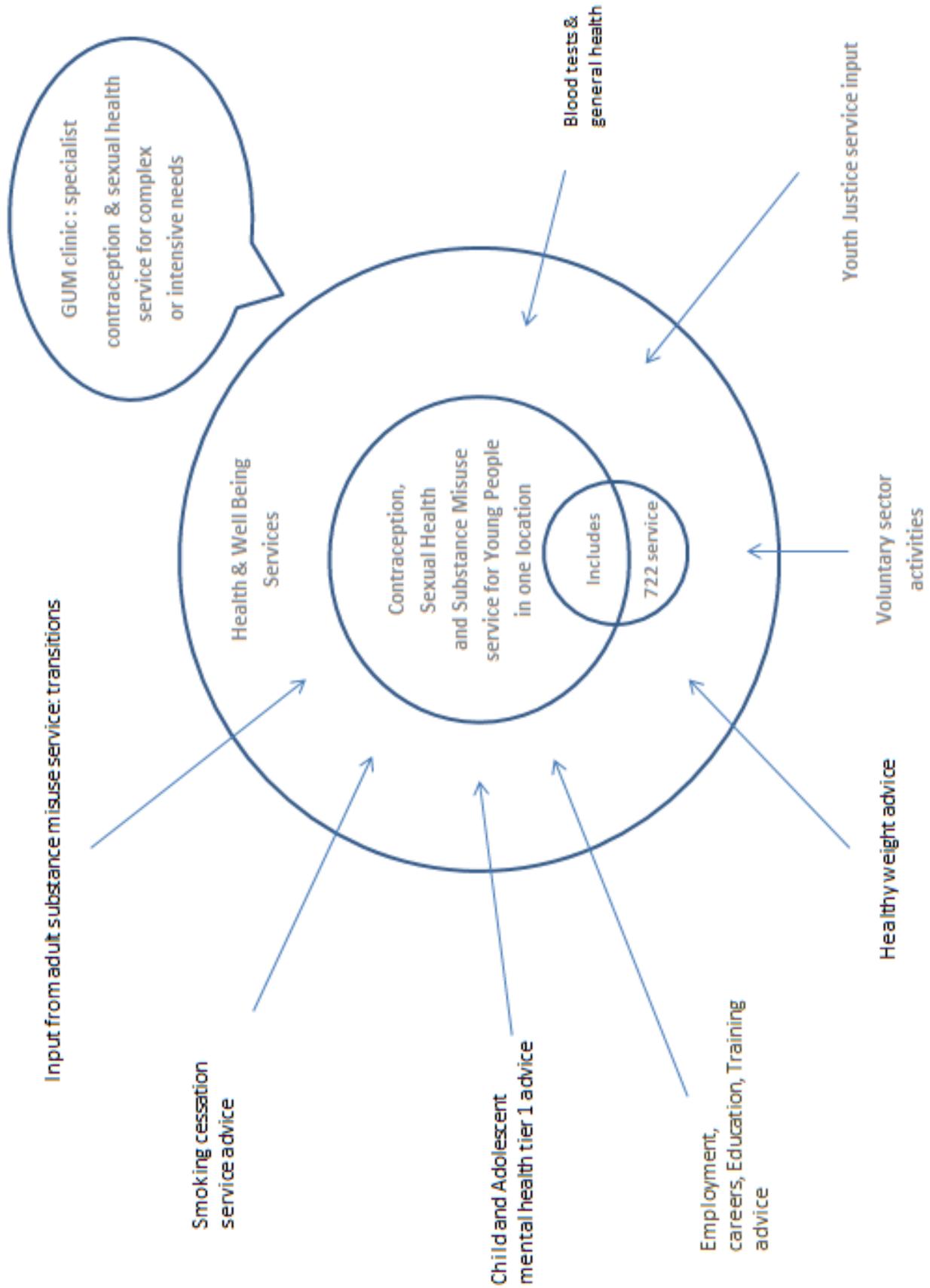
Seven young people from the YA and YIAG group attended the session sharing their thoughts, views and experiences. They were aged between 16-22 years and came from the Chingford, Walthamstow and Leyton areas of the borough. Four attendees were Black British Caribbean, two Asian British Pakistani and one Asian British other. Three were male and four female.

Other attendees assisting in the facilitation of conversation and answering questions were:

- Stephen Bitti, Consultant, Sexual Health Review, London Borough of Waltham Forest
- Yaccub Enum, Head of Partnerships and Sexual Health, Public Health Team, London Borough of Waltham Forest
- Maddy Fogelman, Cultural Programme Officer, London Borough of Waltham Forest
- Graham Terry, Interim Head of Commissioning, London Borough of Waltham Forest
- Jaime Walsh, Manager, Healthwatch Waltham Forest

4. The session

After introductions the group were presented with the following outline of the proposed Young People Health and Wellbeing Centre (see following page). The service is to be implemented in phases, the first phase establishing a sexual health and substance misuse service, with later stages incorporating a wider variety of health and wellbeing services. The diagram suggests what some of the other services might be, and young people were asked for their views on the concept of the service, as well as some specifics about location, opening times, who might run it, what other services might be included, a potential name for the clinic, how to make it welcoming, aspects of the waiting area, marketing and advertising, and how young people could continue to be involved in the development and overview of the service going forward. The following sections outline the discussion and individual comments made by young people in attendance. All comments are bullet pointed and or in italics where contained within a broader statement.



Concept of the service

There was general consensus amongst the group that there is currently a real lack of support for young people in the borough and so *'everything else, on top of sexual health services, would be an extra'*.

- It feels like the need is a community centre, a hub for everything. Especially as we lack anything specific for young people.

The group discussed the importance of reputation and being able to ensure anonymity, which was a strong theme that continued to come through in later discussions:

- Young people care a lot about their reputation.
- If you are seen to be going into a sexual health services then you will be judged.
- There is stigma if you go to sexual health services. As young people, we think we're invincible, but there is still stigma if you go to these services.
- If the sexual health services had other services attached, then no one will know what they are going for.
- One person agreed on the above perceptions, adding 'as much as people don't want to be seen at sexual health services, the service is still necessary, so people will still need to go there'.
- Another reflected the careful balance that would need to be struck, commenting 'I would hate for Public Health to create this big centre and no one goes there!'
- There is an organisation called Student Minds. They train university students to deliver Health Wellbeing session to other students. Young people delivering support to other young people, could be a service within the service. [<http://www.studentminds.org.uk/student-groups.html>]

Other services

Attendees were asked a variety of interlinked questions including: what services should be included? In what order should they be brought in? If it takes a while to get the other bits in around the sexual health and substance misuse parts of the service, would it still work?

- Some of the other services that could be provided could be employment, careers and training. These would be the easiest thing to disguise your visit.
- A lot of young people have an interest in their health and their weight.
- Additional services could be affordable fitness classes, advice and info about healthy meals or cooking.
- I want to gain muscle.
- A service for money management, stress management and young persons CAB.
- A gang prevention service could be included, although the group confirmed they don't think the issue of gangs 'is as bad as it used to be'.
- There was a query around which part of the Youth Justice Service was being suggested for inclusion. Public Health identified that perhaps using the venue as a meeting place for the service could be an option for young people.

Incorporating GP services

- Yes, having a GP is a plus.
- Having a GP service like you can access at the Oliver Road walk in clinic and A&E would be brilliant.
- Not sure how you would incorporate the GP service.
- I like the idea, it would be very convenient.
- I would like to see a GP service just for young people, not to have everyone seeing the GP.
- At my current GP, you have to phone them before 8:30am so it would be good if I had the option to go to a GP at this place too.
- Having a GP service just for young people might mean that parents would question the young person's need for going there. Giving the service a name like One Location could hide the service is for sexual health. It is more plausible.
- I like the idea of a nurse to give health advice. Having a community nurse to go and speak to. The nurse is not for diagnosis or giving prescriptions but you can talk to someone and get referred on if need be to a doctor.
- Some young people might want a doctor to see them.
- I might more likely go to the GP there than the sexual health service.

Incorporating private investment/private services

Participants didn't engage with having private investment per se, but did comment on private services they would not be adverse to:

- Having a Pharmacy involved would be a good idea.
- If banks or a pharmacy you trust were involved, then that might work.

Who should run the sexual health service? If the provider was a GP, would you go?

- I would go if the GP specialised in sexual health.
- If you had a GP service included then what will prevent the GP services from taking over more of the building/services.

Location

- Need a location where friends and girls cannot see you.
- The sexual health service should be located not on the main road but on a side road in Walthamstow.
- Putting the sexual health services within Walthamstow is good but can't be too central because everyone is always in that area so will see you.
- Don't put the sexual health service opposite the station!
- You do not want to be seen by parents or neighbours.
- Participants also queried how a suitable place would be sourced, reflecting upon the lack on venues in Walthamstow:
- How big will the centre be?
- In terms of space it would be difficult to find a plot of land'.

The outset centre in Walthamstow was mentioned by the group as a possible venue and the attendees discussed its current use:

- Outset Centre is very much tied to the youth service.
- Very much the same people attend all the time, they target people.
- When you walk there, it is a massive estate.
- The Outset Centre is not lit at all. There is no road access.
- Some did not know it as a youth centre.
- It is seen a place that you are invited to go to and not as a drop in centre.
- Would never just walk in and ask for help.
- Not seen as a drop in more as a place for scheduled activities.

Name

- The name should include the words “Health and Wellbeing” rather than “Sexual Health” and “substance misuse”.
- If the service is at Oliver Road then do not call it Oliver Road Sexual Health Clinic. Even if you just say Oliver Road it automatically carries that connotation.
- It would be harder to take that first step and attend the substance misuse service if using the name “substance misuse” within the title of the clinic...the people who attend are seen as bad person.
- Branded as health and wellbeing will be seen as the most important thing
- ‘One Location’ is a good name. This name continued to be discussed throughout the session and was liked by all present.

Waiting area

- I think it should be sorted by gender. For females you wouldn’t like to see a male you know in the clinic.
- Having a waiting room can be off putting when loads of people are there.
- If the waiting room had something to keep me entertained that’s better, don’t just put old magazines for people to read.
- If computers were provided as entertainment then some people will think it is a free internet café.
- Girls don’t like going by themselves, we like to go together.
- Usually in waiting rooms the seats are circular and you can see everyone but at the Islington sexual health service the layout really good. If I was having an intimate conversation, I would know that the rest of room would not hear my conversation.
- The only thing that makes me feel comfortable in that type of place is to have a television showing comedy. Comedy will keep my mind occupied while I wait. Comedy can entertain everyone.
- Having a television gives everyone something to look at instead of each other; you don’t have to worry who else in the room.
- Watching BBC news while waiting is boring.

Waiting times, and drop-in vs appointment system

- Linked to the waiting area, the importance of waiting times for the new service was reflected upon. The Whipps Cross service was used as a comparison:
- The Whipps Cross clinic the waiting time could be up to 2 hours. This is too long to wait.
- I have seen people leaving Whipps Cross clinic because they had waited for a long time and had given up waiting.
- The service provided is just drop in and no pre-booked appointments.
- Long waiting times at the Whipps Cross clinic drop in sessions mean it is difficult to go in college lunch breaks.
- Drop in sessions are good for some people.
- Some people prefer to call up and book a convenient appointment.
- Having to wait 10-15 minutes is acceptable, anything more defeats the point. If you are waiting too long you might see people you don't want to see.

How to make it welcoming?

- I like the Islington sexual health service, I'm not sure of the name 'The zone' or 'The hub'? It feels very shut off, you can not see through the windows to the inside, just the misty windows. When I went inside I was surprised. The décor -it was clean, fresh and there was a person sitting behind a desk. I was greeted with 'Hi, you alright, what you in for...pregnancy test'. It was relaxed, chilled out and not corporate in any way. The staff were quite young with some older staff in their forties.
- Later on it was referred to again, 'when you go inside it has green, stripy leather settees which look cool and quirky, designed for YP. I went with my friend, but whilst I waiting I learnt a lot about the coil. There were lots of leaflets to read.
- It is important to make the reception young person friendly. It can be very off putting if the right person is not at the reception. This very important if you are 14 or 15 years old and you have just lost your virginity...you need someone good to talk to.
- On attendee reflected on what its like now at services for young people, whenever you go into a service all that you are given is a form. I would not want to be given a form by someone who is grey haired, no way!!
- I have respect for old people and would feel that I was being disrespectful to talk to an older person about sexual health. (Some of the other young people present agreed with this statement, and all agreed the approach, attitude and friendliness of the staff was crucial for the service).
- I used to go to a Whitechapel clinic. It was a great service. I used to go with my boyfriend.
- I do not like going to the Oliver Road Walk in Centre, it is like you've got to walk into a doctors surgery first.

Opening times

- There were a variety of conflicting comments and suggestions around when would be the best times to open. Participants reflected that, ultimately,

the service will have to be available for a wide range of people, and that accessible times and days will be different for young teens and older working people in their 20s.

- Afternoon and after school and college time.
- The service should not be in school times. My parents will be informed about my absence from school. I would prefer to attend after 3:30pm.
- College students can attend at lunch time.
- Open at 12pm noon for college students.
- Open till 6pm.
- Not sure if the service should be opened up for people who for work? ...Open till 9pm at the latest.
- It should be open everyday.
- Saturday morning for people who had a crazy night.
- Times could vary each day, but some kind of pattern might be helpful, e.g. every Wednesday late.
- I don't think Sunday is necessary, employees need a break!
- Need to have some kind of service on a Sunday.
- Opening times like Shopping centre on weekdays, Saturday and shorter on Sunday.
- If it is an emergency, I need to deal with the situation. I would go where I need to get sexual health services.
- I hate it when clinics are mobbed and too busy.

Receiving test results and aspects of confidentiality

- I found that having results texted to me works best.
- There should be an option on how the results are sent, not to send only by texting which seems to be the main way results are sent.
- Even though I am 16 years old my mum reads my letters. I am worried if test results are sent by letter.

The group queried confidentiality in respect of parents. Public health explained that if an underage person came in asking for contraception then there is criteria for them to follow...the health professional will have to appraise the situation: If the young person will continue to have unprotected sex then contraception can be given without informing a parent/guardian, however if the person is 11/12years old then there is an obligation to refer to safeguarding.

Advertising

All young people agreed it needs to be advertised as a sexual health service, but also needs a plausible cover (other services), commenting 'marketing is very important', 'mask the real thing behind it'.

Referring back to the potential link with a GP service, one person commented 'as much as you want to hide the fact it is a GP practice, you need to advertise you specialise in sexual health, else I would not know I had to go there. Young people would not know the sexual health service was at that GP surgery. If I wanted a sexual health service I wouldn't automatically think it could be accessed through a young person focussed GP service'. Other comments included:

- Do not really want flyers to advertise as my parents might see it too.
- Looking at an age range from 11yr olds and 25 year old, the ages are very different. They look at different things and are in different places.
- I don't think an app on a mobile phone would work. Once the novelty of the app wears off people delete it.
- Putting the information on a website is a good idea, if I need to look up something I google it. All the information you need would be on the website like opening hours, accurate description of services, with correct telephone numbers.
- I would like to see telephone number that does not charge you or only at the normal rate.
- I have tried to google "sexual health Waltham Forest" but did not get any useful information.
- Posters could be put up in schools and colleges.
- Common knowledge is how it works now. Oliver Road Walk in Service is known as a place you would go to. The new sexual health service, with the possible name One Location would become like Oliver Road as a place to go for sexual health services. Young people would find out by word of mouth.
- I go to the Oliver Road Walk in Centre because it feels safe.
- On a previous occasion we had acted as 'mystery shoppers' at the Oliver Road Walk in Centre. We found that all the information and website details were out of date. We visited the Centre at a time advertised on the website and found that the Centre was closed.
- Not sure if social media have a role here?
- It could be advertised on twitter, if there are jokes and links or informative jokes you may get people clicking through.
- Do not advertise sexual health services on Facebook because my family are on it. I would not be able to like, follow or friend the Facebook page.
- You can advertise on twitter through 'Uber facts' which is very good. I found it funny and informative.
- Have to be careful what is put on twitter, if the service is made public, if it gets called on twitter, no one is going to want to go there.
- It needs to be promoted but no one wants to affiliate themselves to it.
- We do not necessarily need to use social media.
- There could be an online talk to someone in the site.
- I would use online booking more. It has to be sophisticated enough not to book two people on the same appointment.
- On a bank website I used, there was an auto person talking to you. The worst thing I have seen, it felt like a computer answering the questions, for me it just doesn't work.
- Having a fact of the day on the website would give impression the pages are being updated daily.
- I would be worried that the information on the website looks old or doesn't have any dates on it. Like this years date or updates etc. If that was the case I will not value the other information as it might all be out of date too. Doesn't have to be much but has to be actively updated with dates.
- There is a page on the NHS website called 'sho-me.nhs' where you can talk to and ask questions to a Dr Sarah. You could link that to the website if it

already exists. [NB Healthwatch looked up the site and found the service no longer exists. <http://www.sho-me.nhs.uk/ask-doctor-sarah.aspx>].

Young people also queried whether people attending for a particular service would take note of the other services available, using the analogy "if you go to Tesco for milk, you don't look at bread". This might be a challenge for the other services and the marketing/publicity of the wider health and wellbeing offer within the building.

5. Next steps

The group talked about the next steps and future of this service and how they could, or would like to be involved. Public Health committed to working with young people to design, monitor and evaluate the service and asked whether the young people attending this session would be interested in this involvement? Comments were as follows:

- [I am] definitely interested and would like ownership.
- It is important that who ever runs this service that young people are involved.
- YA and YAIG have done loads of stuff, we can train staff.
- Young people can have a type of steering group.
- YAIG would be interested to provide this. We can get involved and we would know how it would work.
- Young people could have an input in the design of the website.
- Ongoing feedback for the service would be good. A survey asking for feedback on services could be sent out with test results.

Within the time frame, Public Health agreed to come back to the young people involved to discuss: potential sites for the sexual health service, to consider young people being involved in the commissioning panel, and in an ongoing way in the service overall.

Public Health agreed to feed back, through Healthwatch, the elements of today's input and feedback that have been incorporated into the service specification, and or any other elements of the commissioning and procurement process.

The service is looking to open by 1st October 2015

Healthwatch would like to thank all those who participated.