Appendix 3b

Blackpool Sexual Health Strategy

2023 - 2026:

ACTION PLAN



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Version number: 10

Date: October 2023

Our vision For everyone to be supported to achieve their optimal sexual health and wellbeing, regardless of their circumstances, and to be able to access the sexual health services that they need, when they need them.

The areas we will focus on

Priority 1	Priority 2	Priority 3	3 Prio	rity 4	Pı	riority 5	Priority 6
Prevent and reduce the transmission of sexually transmitted infections	Reduce unplanned pregnancy	Improve prevention testing, treatment a support fo people livin with HIV	people so skills, so and se that the to ac optima	e young with the upport ervices ey need hieve I sexual	ined	Reduce Jualities in Jual health	Tackle sexual violence
			<u>'</u>				
Guiding principles	Quality	Accessible	Collaborative	Place-b	ased	Co-produce	ed Innovative

BLACKPOOL SEXUAL HEALTH STRATEGY 2023 – 2026

Priority area 1: Prevent and reduce the transmission of STIs

- 1. Increase opportunistic sexually transmitted infection (STI) testing in non-sexual health settings.
- 2. Provide choice in patient access to STI testing, building upon recent digital innovation whilst also ensuring that those who need or prefer to access services in person are still able to do so.
- 3. Promote condom use.

OBJECTIVE	ACTION	ESTIMATED TARGET COMPLETION DATE
	1.1 Include STI testing in the health offer made by drug and alcohol clinical/treatment services.	Dec 2023
1. Increase opportunistic STI testing in	 1.2 Ensure that the Public Health behaviour change training offer includes training for frontline practitioners in clinical and non-clinical settings (including outreach workers) on: Having conversations about sexual health Delivering brief interventions for sexual health 	Mar 2024
non-sexual health settings	1.3 Promote and improve uptake of the Public Health behaviour change training offer on sexual health to non-sexual health settings, including outreach services and services supporting individuals with complex needs.	Jun 2024
	1.4 Explore ways to increase the uptake of chlamydia testing in medical termination of pregnancy services.	Oct 2023
	1.5 Explore whether phlebotomy training can be offered to drug and alcohol services.	Dec 2023
2. Provide choice in patient access to STI	1.6 Develop an online booking system for specialist sexual health services (including developing online consultancy).	May 2024
testing, building upon recent digital innovation whilst also ensuring that those who need or prefer to access	1.7 Review and consider the optimal mix of booked versus drop-in appointment options for clinical sexual health services.	Jan 2024
services in person are still able to do so	1.8 Explore whether modifications could be made to the online sexual health service to further improve access to testing and patient experience.	Sep 2023
	1.9 Ensure that BTH include safer sex/condom use in any sexual health campaigns.	Ongoing – review biannually
3. Promote condom use	1.10 Develop a targeted campaign around safer sex/condom use to the MSM group.	Mar 2024

Priority area 2: Reduce unplanned pregnancy

- 1. Reduce the rate of teenage pregnancy amongst Our Children.
- 2. Develop a robust training programme for long-acting reversible contraception (LARC) fitting for non-specialist healthcare professionals.
- 3. Build upon work to promote LARC uptake to women with complex needs, including those with substance misuse issues and asylum seekers.
- 4. Build upon work to embed LARC provision within maternity services.
- 5. Improve LARC provision in medical termination of pregnancy services.
- 6. Work towards establishing Women's Health Hubs within primary care networks and tier 3 sexual and reproductive health services.

OBJECTIVE	ACTION	ESTIMATED TARGET COMPLETION DATE
	2.1 Establish a rolling programme of education for foster carers and Personal Advisers about contraception and prevention of unplanned pregnancy.	Jun 2024
1. Paduce the rate of teepage programmy	2.2 Expand domiciliary sexual health nursing provision to provide an outreach service to children's homes and Our Children.	Feb 2024
Reduce the rate of teenage pregnancy amongst Our Children	2.3 Provide training to Supporting Our Children Social workers and Personal Advisers for Our Children in having regular conversations about sexual health with children for whom they are responsible.	Oct 2023
	2.4 Explore the feasibility of establishing a text reminder service for young people on Depot contraception.	Nov 2023
2. Develop a robust training programme	2.5 Map and review which professionals and/or services within primary care are providing LARC fitting.	Oct 2023
for LARC fitting for non-specialist healthcare professionals	2.6 Increase uptake of training in LARC fitting for services and/or professionals identified in the above review.	May 2024
	2.7 Expand the Harm Reduction Forum to include maternity and other reproductive services.	Sep 2023
3. Build upon work to promote LARC uptake to women with complex needs, including those with substance misuse	2.8 Identify whether there is interest in holding an annual multi-agency conference for frontline workers in sexual health to share information about existing service provision.	Apr 2024
issues and asylum seekers.	2.9 Increase uptake of LARC in women who access the Early Parenthood Service.	Mar 2025
	Also see action 5.20 (outreach contraceptive clinic for refugees and asylum seekers).	

	2.10 Explore the opportunity of using the London Measure of Unplanned Pregnancy to measure the rate of unplanned pregnancy and to support targeted interventions for contraception.	Dec 2023
4. Build upon work to embed LARC	2.11 When the new senior midwifery team is in post, explore the use of the Depot injection before discharge from midwifery.	Dec 2023
provision within maternity services.	2.12 Establish a training programme in postnatal contraception for doctors working in Obstetrics and Gynaecology.	Nov 2024
	2.13 Explore the feasibility of offering depot injections and the progesterone-only pill (POP) routinely after childbirth if a LARC method is inappropriate or not available, including the option of expanding the current Patient Group Directive for contraception to cover midwives for Depot injections and POP.	Jan 2025
5. Improve LARC provision in medical termination of pregnancy (TOP) services	2.14 Establish a robust pathway for LARC provision for women undergoing medical TOP.	Apr 2024
6. Work towards establishing Women's Health Hubs within primary care	2.15 Explore the business case to establish an intermediate Women's Health Hub at Whitegate Drive.	Oct 2024
networks and tier 3 sexual and reproductive health services.	2.16 Pilot a Women's Health Hub in the South Shore Primary Care Network.	Jul 2023
Objectives 1 - 5	2.17 Amend existing LARC removal templates to include a standard conversation for women requesting early removal of LARC.	Apr 2024
Other	2.18 Review future risk in relation to access to termination of pregnancy services for women with complex needs, and identify potential options for the future.	Dec 2024

Priority area 3: Improve prevention, testing, treatment and support for people living with HIV

- 1. Help individuals to maintain their negative HIV status through greater awareness and uptake of pre-exposure propyhlaxis.
- 2. Reduce the number of people living with undiagnosed HIV
 - a) Increase the offer and uptake of HIV testing in primary care
 - b) Further increase uptake of opt-out HIV testing in the Emergency Department
 - c) Increase awareness of HIV testing within both sexual health services and wider, non-sexual health settings.
 - d) Continue to minimize the number of late diagnoses of HIV.
 - e) Improve the process of partner notification.
- 3. Reduce the number of individuals with a transmissible level of HIV by minimizing loss to follow-up and maximizing engagement with services.
- 4. Monitor and improve the quality of services to support people living with HIV, especially those facing multiple disadvantage.

OBJECTIVE		ACTION	ESTIMATED TARGET COMPLETION DATE
All objectives		3.1 Explore the option of a clinical and non-clinical collaborative training programme to improve knowledge and understanding of HIV testing, treatment and prevention (e.g. PrEP, PEP) for vulnerable groups.	Mar 2024
		3.2 Blackpool to join the 'Fast Track Cities' initiative, and sign up to the Paris Declaration.	Sept 2024
Help individuals to mai status through greater as	~	3.3 Develop a standard protocol for administering post-exposure prophylaxis (PEP) that includes consideration of long-term PrEP.	Oct 2023
Pre-exposure pro	-	Also see action 4.3 (covering the topic of PrEP within PSHE lessons).	
	All parts of Objective 2	3.4 Explore additional opportunities to increase uptake of HIV testing by those in ethnic minority groups, particularly people of Black African ethnicity.	Mar 2024
2. Reduce the number of people living with undiagnosed HIV	(a) Increase the offer and uptake of HIV testing in primary care	3.5 Work with the Lancashire and South Cumbria Integrated Care Board/Place-Based Partnership to increase uptake of training on HIV testing in primary care.	June 2025
	(b) Further increase uptake of opt-out HIV	3.6 Increase testing in the Emergency Department through the inclusion of the Same Day Emergency Clinic (SDEC).	Jun 2023
	testing in the Emergency Department	3.7 Continue to explore ways to increase uptake of HIV testing in the ED.	Ongoing

(c) Increase awareness of HIV testing within	3.8 Engage with services that support vulnerable individuals (e.g. services supporting those with learning disabilities and autistic spectrum disorders, Mental Health difficulties, substance misuse issues and those experiencing domestic abuse) to ensure and facilitate staff access to local HIV awareness training.	Mar 2024
services and wider,	3.9 Develop and implement a marketing plan and campaign(s) to promote awareness of HIV testing and PrEP.	Jun 2023
non-sexual nealth settings	3.10 Develop a brief training/awareness podcast for sharing with primary and secondary care services, to promote the need for routine HIV testing and increase awareness of how to clinically recognize a patient with HIV.	Apr 2024
(d) Continue to minimize the number of late diagnoses of HIV	3.11 Review the processes by which all late diagnoses of HIV are investigated.	Nov 2023
(e) Improve the process of partner notification	3.12 Review the 2019 partner notification audit and undertake a re-audit to compare results and explore compliance with BHIVA targets.	Oct 2023
	3.13 Review and ratify the recall policy in place to reduce lost to follow-up and promote engagement with the services.	Aug 2023
of individuals with a by minimizing loss to	3.14 Undertake an audit of the recall policy to explore the extent to which patients are being managed in accordance with the policy.	Mar 2024
es	3.15 Develop a specific pathway to support individuals with HIV who have been lost to follow up for over 12 months to re-engage with treatment services.	Feb 2024
e quality of services to	3.16 Continue to hold weekly HIV MDT meetings.	Ongoing (bi-annual review)
HIV, especially those isadvantage.	3.17 Continue to ensure representation from HIV services at MDT meetings across wider services, e.g. Mental Health, maternity, dermatology, oncology, etc.	Ongoing (bi-annual review)
- (- (- (- (- (- (- (- (- (- (of HIV testing within both sexual health services and wider, non-sexual health settings (d) Continue to minimize the number of late diagnoses of HIV e) Improve the process of partner notification f individuals with a by minimizing loss to g engagement with es	supporting those with learning disabilities and autistic spectrum disorders, Mental Health difficulties, substance misuse issues and those experiencing domestic abuse) to ensure and facilitate staff access to local HIV awareness training. 3.9 Develop and implement a marketing plan and campaign(s) to promote awareness of HIV testings and PrEP. 3.10 Develop a brief training/awareness podcast for sharing with primary and secondary care services, to promote the need for routine HIV testing and increase awareness of how to clinically recognize a patient with HIV. (d) Continue to minimize the number of late diagnoses of HIV are investigated. (e) Improve the process of partner notification 3.12 Review the 2019 partner notification audit and undertake a re-audit to compare results and explore compliance with BHIVA targets. 3.13 Review and ratify the recall policy in place to reduce lost to follow-up and promote engagement with the services. 3.14 Undertake an audit of the recall policy to explore the extent to which patients are being managed in accordance with the policy. 3.15 Develop a specific pathway to support individuals with HIV who have been lost to follow up for over 12 months to re-engage with treatment services. 3.16 Continue to hold weekly HIV MDT meetings. 3.17 Continue to ensure representation from HIV services at MDT meetings across wider services, e.g. Mental Health, maternity, dermatology, oncology,

Explore whether to re-establish quarterly meetings between clinical non-clinical HIV services.	Jul 2023
Explore the option of developing a joint service user group with clinical non-clinical HIV services.	Jan 2024
Explore the need for a befriending service for those living with HIV, to alongside the HIV Support Service.	Feb 2024
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Priority area 4: Provide young people with the skills, support and services that they need to achieve optimal sexual health

- 1. Ensure that the content of Personal, Social, Health and Economic (PSHE) education is tailored to local need, is co-produced with young people and includes information about how to access local sexual health services.
- 2. Through consultation and co-production, ensure that the design and delivery of sexual health services meet the needs of local young people.
- 3. Work with young people to ensure consistent, localised and appropriate messaging regarding sexual health.
- 4. Provide fast-track pathways into appropriate services for young people at risk of poor sexual health outcomes.
- 5. Review and improve the extent to which NICE guidance on harmful sexual behaviour is being implemented within educational settings.

OBJECTIVE	ACTION	ESTIMATED TARGET COMPLETION DATE
Ensure that the content of Personal, Social, Health and Economic (PSHE)	4.1 Facilitate consultation work with young people to explore the extent to which content of PSHE lessons meet their needs.	Nov 2023
	4.2 Review the current content of PSHE education locally, including the extent to which is tailored to local context. Develop an action plan, co-produced with young people, to make improvements as needed.	Jan 2024
education is tailored to local need, is co-produced with	4.3 Ensure that the topics of HIV and PrEP are covered robustly within local PSHE lessons.	Jan 2024
young people and includes information about how to access local sexual health	4.4 Ensure that local PSHE content includes the topics of consent, sexual violence and media.	Dec 2024
services	4.5 Undertake consultation work with young people to explore their views on how PSHE education could help address stigma associated with identifying as LGBTQI.	Jun 2024
	4.6 Through the SHEU survey, explore new ways to capture young people's feedback on PSHE education related to sexual health.	Nov 2024
2. Through consultation and	4.7 Consult with young people to explore whether opening times of sexual health services could be amended to better meet their needs.	Aug 2023
co-production, ensure that the design and delivery of sexual health services meet the needs of local young people	4.8 Explore young people's views on the locations from which young people are most likely to access condoms.	Aug 2023
	4.9 Explore what role Family Hubs could play, if any, in promoting sexual health and/or delivering sexual health services for young people.	Oct 2023
	4.10 Review the current training offer around sexual health for early help practitioners and school nursing staff.	Oct 2023

	4.11 Explore the option of developing a training offer on brief intervention for sexual health for early help practitioners and school nursing staff.	Feb 2024
3. Work with young people to ensure consistent, localised and appropriate messaging regarding sexual health	4.12 Through the young people's sexual health stakeholder group, set up a working group of young people and stakeholders from relevant agencies to develop appropriate campaigns and messaging around sexual health.	Apr 2024
4. Provide fast-track pathways into appropriate services for young people at risk of poor sexual health outcomes	4.13 Link to actions 5.2, 5.3 and 5.4 (section 5) for developing fast-track and domiciliary care pathways, to consider how to amend these pathways for young people (e.g. considering links with school nursing).	As per section 5
5. Review and improve the extent to which NICE guidance on harmful sexual	4.14 Review what is currently offered to mainstream and special schools in terms of training on identifying and managing harmful sexual behaviour, and develop further resources if needed.	Dec 2023
behaviour is being implemented within educational settings.	4.15 Based on the offer to schools (see above), develop a training offer to community youth settings (e.g. youth workers, residential settings) for identifying and managing harmful sexual behaviour.	Mar 2024

Priority area 5: Reduce inequalities in sexual health

- 1. Improve access to sexual health services for those with complex needs.
- 2. Ensure that sexual health services meet the needs of LGBTQI individuals.
- 3. Ensure that local services meet the sexual health needs of Our Children and Care Leavers.
- 4. Improve the delivery of sexual health services to refugees and asylum seekers.

OBJECTIVE	ACTION	ESTIMATED TARGET COMPLETION DATE
ALL	5.1 Develop an action plan to address the findings of the sexual health services equity audit.	Oct 2023
	5.2 Set up a task and finish group, to include co-production with those with lived experience, to improve access to sexual health services for those who are vulnerable and/or have complex needs (including multiple disadvantage, learning disabilities and autistic spectrum disorders, sex work, Mental Health issues).	Jul 2023
	5.3 Through the above task and finish group, develop formal fast-track pathways into sexual health services for those who are vulnerable and/or have complex needs (including multiple disadvantage, learning disabilities and autistic spectrum disorders, sex work, Mental Health issues).	Jul 2024
1. Improve access to	5.4 Review the sexual health offer included within the domiciliary pathway for individuals facing multiple disadvantage.	Sept 2023
sexual health services for those with complex needs	5.5 Through the above task and finish group, work with sexual health services to develop a method of reporting uptake of Long-Acting Reversible Contraception (LARC) in women facing multiple disadvantage.	Sept 2023
necus	5.6 Explore whether/how service user feedback on quality of and access to sexual health services can be captured for individuals facing multiple disadvantage.	Nov 2023
	5.7 Review the current sexual health offer for prison leavers who become resident in Blackpool.	Jan 2024
	5.8 Include a discussion about sexual health needs as part of pre-engagement work undertaken with individuals accessing multiple disadvantage services (e.g. ADDER, Changing Futures).	Feb 2024
	5.9 Ensure that staff working in sexual health services are included in the offer of trauma-informed training being made to wider services across Blackpool.	Oct 2023
	5.10 Undertake insight work with women who have experienced menopause-related mental ill health to identify common themes and to help inform better care. (Link to Blackpool Community Suicide Prevention Action Plan.)	Mar 2024

	5.11 Undertake an assessment of the health needs of the local transgender population.	Sept 2024
	5.12 Implement recommendations from the health needs assessment of the local transgender population.	Mar 2025
	5.13 Undertake an evidence review of barriers to accessing sexual health services for LGBTQI individuals, particularly the MSM group.	Oct 2024
2. Ensure that sexual health services meet	5.14 Undertake insight work to explore the needs and wishes of young LGBTQI individuals in relation to sexual health services.	Sept 2024
the needs of LGBTQI individuals	5.15 Explore the level of uptake by transgender and male sex workers of support offered by the harm reduction service.	Apr 2024
	5.16 Review the MSM outreach clinic pilot.	Sept 2023
	5.17 Promote awareness of eligibility for the HPV vaccination amongst the MSM group, including where to access this.	Sept 2023
	5.18 Explore the need for a PrEP Users Peer Support group, to address risky behaviour and adherence.	Jan 2024
3. Ensure that local services meet the	See actions listed in priority area 2, objective 1.	
services meet the sexual health needs of Our Children and Care Leavers	5.19 Review the extent to which sexual health is included within the Our Children medical template, if at all. Explore whether the template should/could be amended to better address sexual health.	Apr 2024
4. Improve the delivery of sexual health services to refugees and asylum seekers	 5.20 Establish outreach clinics at an appropriate venue (e.g. Metropole Hotel), with access to information in alternative languages for asylum seekers. Services to include: Contraception advice and provision STI testing HIV testing 	Oct 2023

Priority area 6: Tackle sexual violence

- 1. Adopt a Public Health approach to tackling sexual violence, including primary prevention programmes.
- 2. Improve education to young people about consent, sexual violence and media.
- 3. Provide high quality services for victims of rape and sexual violence.
- 4. Reduce barriers to proceeding with prosecution for victims of sexual violence crimes.
- 5. Prevent and reduce the sexual exploitation of children, young adults and adults in Blackpool.
- 6. Create safer streets, especially after dark.

OBJECTIVE	ACTION	ESTIMATED TARGET COMPLETION DATE
Adopt a Public Health approach to tackling sexual violence, including primary prevention programmes	6.1 Ensure that prevention and early intervention is a priority for the Aquazure working group.	Jun 2023
	6.2 Work to embed 'Green Dot' bystander principles into the community and local businesses.	Ongoing (review quarterly)
	6.3 Ensure that there are regular reminders and support sessions in relation to promoting awareness of bystander activity and training.	Ongoing (review quarterly)
	6.4 Explore ways to reduce the number of sexual assaults and rape within the nighttime economy.	Ongoing (review quarterly)
2. Improve education to young people about consent, sexual violence and media	See actions on PSHE in area 4, objective 1.	
	6.5 Identify possible funding opportunities to address gaps in PSHE education in relation to the topics of consent, sexual violence and media.	Sept 2024
	6.6 Work with PSHE education leads to support mainstream and special schools in providing regular, ongoing training on consent, sexual violence and media.	Ongoing (review biannually)
3. Provide high quality services for victims of rape and sexual violence	6.7 Work with commissioners to map sexual violence support services and identify gaps.	Sept 2023
	6.8 Seek funding opportunities to address gaps identified in mapping exercise.	Jan 2024
	6.9 Develop a directory of services available to support victims of rape and sexual violence.	Jun 2023
	6.10 Develop a system for effectively maintaining the directory of services to ensure it is accurate and up-to-date.	Jun 2023
	6.11 Review how sexual violence pathways are currently operating (including ISVA pathways and pathways for reporting, referral and support), and explore how to improve effectiveness and equity of provision.	Jan 2024

	6.12 Explore interventions to prevent individuals being repeat victims of rape and sexual violence.	Mar 2024
4. Reduce barriers to proceeding with prosecution for victims of sexual violence crimes	6.13 Undertake an evidence review of reasons why individuals who report sexual violence may choose not to proceed with prosecution.	Feb 2024
	6.14 Consider undertaking insight work locally to explore reasons for not proceeding with prosecution.	Feb 2024
	6.15 Based upon the available evidence, develop an action plan to increase the proportion of victims who proceed with prosecution.	Jul 2024
5. Prevent and reduce the sexual exploitation of children, young adults and adults in Blackpool	6.16 Develop a formalized process for the referral and support of young adults and adults who are at risk of sexual exploitation (drawing upon work already undertaken to prevent/reduce child sexual exploitation).	Sept 2024
	6.17 Regularly review processes for the prevention and reduction of child sexual exploitation, to ensure that they continue to operate effectively.	Sept 2024
	6.18 Increase the use of civil tools and powers in tackling perpetrators of sexual violence.	Oct 2024
6. Create safer streets, especially after dark	6.19 Continue to apply for available funding to implement further interventions to improve the safety of streets.	Ongoing (review biannually)

Blackpool Sexual Health Strategy Action Plan: Version 10, October 2023

GLOSSARY OF TERMS

AIDS Acquired Immunodeficiency Syndrome
BASHH British Association for Sexual Health and HIV

BHIVA British HIV Association

BTH Blackpool Teaching Hospitals NHS Foundation Trust

CLT Corporate Leadership Team

Complex needs Needs that are complex due to underlying vulnerabilities, including (but not

limited to) substance misuse, homelessness, contact with the criminal justice system, domestic violence, Mental Health issues, physical co-morbidities, learning disabilities and autistic spectrum disorders, refugee/asyslum seeker

status.

CSAP Children's Safeguarding Assurance Partnership

ED Emergency Department

FSRH Faculty of Sexual and Reproductive Healthcare

HIV Human Immunodeficiency Virus

HPV Human Papilloma Virus

ISVA Independent Sexual Violence Advisor
JSNA Joint Strategic Needs Assessment
LARC Long Acting Reversible Contraception

LET Lived Experience Team

LGBTQI LGBTQI is an umbrella term for Lesbian, Gay, Bisexual, Transgender,

Queer/Questioning, Intersex, Asexual and others

MSM Men who have Sex with Men

Multiple disadvantage People experiencing a combination of some or all of the following: substance

misuse, homelessness, contact with the criminal justice system, domestic

violence and Mental Health issues.

NATSAL National Survey of Sexual Attitudes and Lifestyles

NCSP National Chlamydia Screening Programme

NHS National Health Service

NICE National Institute for Health and Care Excellence
OHID Office for Health Improvement and Disparities

Our Children A child who has been in the care of their local authority for more than 24 hours

is known as a 'looked after child'. Looked after children are also often referred to as 'children in care'. In Blackpool, children who are in our care are referred to as

'Our Children'.

PEP Post-Exposure Prophylaxis
PreP Pre-Exposure Prophylaxis

PSHE Personal, Social, Health and Economic Education

SDEC Same Day Emergency Care

SHEU Schools and Student Health Education Unit

SMT Senior Management Team
STI Sexually Transmitted Infection

TOP Termination of Pregnancy or abortion

WHO World Health Organization