**Annual report 2016/17**

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1. **Background and Aims**

The Camden and Islington Young People’s Sexual Health Network (CAMISH) was commissioned by Camden and Islington local authorities in April 2015 to provide sexual health services for young people under the age of 25 in both boroughs. Network services are provided by the Brandon Centre, Brook and the Homerton University Hospital NHS Foundation Trust (Homerton).

The three providers each run integrated sexual health, contraceptive and counselling services, offering prevention, diagnosis and management of sexually transmitted infections, pregnancy testing and support, contraception (including emergency and long acting reversible contraception), counselling services and deliver sex and relationships education (SRE) in schools.

In addition to the offer above, each organisation has been commissioned to provide a specialism (see diagram below).

All three providers are coordinated through the network coordination team, whose role it is to bring all three providers together, support better partnership working and identification of young people at risk and improved outcomes through better reach and coverage.
Our Aims

- To offer confidential, open access sexual health, contraceptive and counselling services for young people 13-24 years old in Camden and Islington.
- To give young people information and skills to have safe, fulfilling and enjoyable relationships and to take responsibility for their sexual health and wellbeing.
- To reduce unwanted pregnancies for women under the age of 25 and in particular for teenagers.
- To reduce the burden of sexual ill health in young people through early diagnosis and rapid access to treatment.
- To identify young people’s wider needs when they engage with health providers around their sexual health.

2. Introductions

From the network coordinator

In April 2017 the Camish Network saw its second year in operation coming to a close. It was a really good year for us as all providers have now settled into the new model of working as a network and developed closer links with each other. Our joint working programme has strengthened and each service is benefiting from the skills and experience of each other’s staff to complement and support our work as a whole.

In January we held a stakeholder morning and forged closer relationships with our external partners to reach more young people in both our boroughs. Young people from our participation group supported the event and gave a very powerful presentation about what it means to be involved in shaping our services.

The last year also came with some testing times, with our Brook partners undergoing a service-wide restructure. All network partners saw significant staff changes and have now settled into their new roles. In addition, Brook and Pulse underwent inspections from the Care and Quality Commission (CQC), just before and after Christmas respectively; the reports were very positive and inspectors were impressed with the work we are doing as a network.

Despite these challenges, the teams have worked incredibly hard to further build our services for young people and maintain a high standard of care. The safeguarding, clinical governance and education practitioners groups have continued to meet regularly to ensure consistency, coordination and quality across all network services.

Effi Stergiopoulou, Network Coordinator
From commissioners

This year both Camden and Islington commissioners have been happy to see the progress the Young Person’s Sexual Health Network has made, including embedding as a cohesive network of services. We have seen the providers working very well together especially around issues such as safeguarding where the respective leads at the CCGs are pleased with the processes in place to safeguard vulnerable clients.

Over the past year we have been impressed with a number of achievements, particularly with the young people that presented their experience of participation, engagement and involvement at the stakeholder event.

Providers have worked together effectively to deliver health promotion events and other key activities.

The SRE delivery in schools has been well-coordinated and facilitated across both boroughs by the network who have liaised with council Health and Wellbeing Teams.

There has been good progress in engaging with vulnerable groups, including those in supported accommodation and looked after children.

The clinics continue to see high numbers of young people and engagement work has been undertaken over the year to confirm good practice around opening times and access.

Commissioners are looking forward to seeing the further development and achievements of the network over the coming year.

Jennie Mackeith, Strategic Commissioning Manager, Camden and Chloe Collins, Commissioning Officer, Islington

3. Safeguarding

In addition to our regular safeguarding subgroup meetings, the network liaises with a number of professionals and groups in Camden and Islington, including the designated nurses for child protection, the MASE panels and others to ensure we are as connected as possible in terms of safeguarding.

This last year the subgroup conducted a review of the safeguarding assessments used in our clinics to confirm that they are in line with national recommendations and consistent across the network. We were reassured to see that overall, providers’ assessments conformed to the national proforma.

Moreover, the network introduced a standardised quarterly notes review of 20 notes of patients under the age of 18. The purpose is to ensure the healthcare professionals
seeing the young people are assessing safeguarding risks adequately; this will help us to better support staff with training and strengthen learning within our organisations.

As a network we want to ensure that we share good practice and learning with each other for the benefit of our staff and the young people we work with. In addition to each provider’s individual training programme, the network offers joint training at our quarterly all staff network meetings. This year, Homerton also made places on selected safeguarding updates available to staff from Brook and the Brandon Centre, thus allowing our partners to benefit from being in a network.

4. Clinical Governance

Shared computer system:
One of our first tasks in 2016 was to pilot and implement, a shared cloud-based computer system to enable Homerton, Brook and Brandon Centre staff to access our shared guidelines, pathways, reports, meeting minutes, important dates in our network calendar and other relevant materials. This was a very important step as providers do not have access to each other’s computer networks.

Clinical audit:
The network conducted their first joint audit on the topic of pregnancies. Below are some of the results that clinics will use to inform any service development in this area.

1. The majority of patients reviewed opted to terminate their pregnancy.
2. For 39 out of 52 patients it was their first termination of pregnancy (TOP)
3. 31 patients had started a method of contraception after the TOP, for 18 patients this was not known or not needed and 3 patients had not started any method.
4. 13 patients received contraception within the CAMISH network following the TOP, 17 from the TOP provider, 4 from elsewhere.

As part of the audit, clinics conducted retrospective qualitative interviews with patients about their experience of our services when they sought care around their pregnancy. We were very pleased to see that all young people reported a positive experience and the services as being efficient; staff were found to be friendly, understanding and supportive in helping young people make a decision about their pregnancy in a non-judgemental and non-pressurised manner.

Access to our clinics:
The network reviewed the times and different ways young people access our clinics. To this end we ran a questionnaire, co-produced with young people, to identify any barriers. We planned to get feedback from a significant number of young people who are not currently attending our clinics (especially under 16s, young men, LGBTQ+ and BAME young people and those with learning disabilities or difficulties) via our outreach teams and schools and realised that more thought and better planning is required for this to be successful and for us to gain the information we need.
Below are some highlights of the feedback we received from young people:

1. 19% said they would prefer a separate clinic session for under 18s and over 18s.
2. 74% would like self-testing for Chlamydia and Gonorrhoea if it reduces waiting times; the main anxiety of the remaining 26% was around not feeling confident to perform the test.
3. Waiting times were stated as a barrier to accessing our clinics and also as a reason for not recommending our clinics; we are continuously looking at ways of improving this.
4. Preference of an appointment over a walk-in service:

<table>
<thead>
<tr>
<th></th>
<th>At busy times e.g. after school</th>
<th>For procedures, such as inserting a coil</th>
<th>For counselling</th>
<th>General check or contraception</th>
</tr>
</thead>
<tbody>
<tr>
<td>Walk-in</td>
<td>27%</td>
<td>22%</td>
<td>40%</td>
<td>76%</td>
</tr>
<tr>
<td>Appointment</td>
<td>72%</td>
<td>77%</td>
<td>59%</td>
<td>23%</td>
</tr>
</tbody>
</table>

5. **The Voice of Young People**

Getting young people’s voices heard is at the heart of the network’s philosophy. We believe in asking young people what they want from our services and supporting them in shaping them and making them their own.

In August, the young people’s participation coordinator held our first “Sexual Health Services Participation Event”. It was a very successful day and the work achieved is listed below.

1. The access to services questionnaire (mentioned above) was written to find out young people’s barriers to accessing our clinics
2. The patient feedback questionnaire was planned, to learn how patients experience our clinics
3. The network’s action plan for consulting young people was devised. At a later date the participation group decided to name their group “Our CAMISH”.
4. The CAMISH confidentiality statement was written
5. Promotional materials were chosen for the network
6. Ideas for the CAMISH website and videos were collected

6. **Our Clinics**

The following clinics are part of the CAMISH network:

<table>
<thead>
<tr>
<th>Camden</th>
<th>Islington</th>
</tr>
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<tbody>
<tr>
<td>Brook Euston</td>
<td>Pulse N7</td>
</tr>
<tr>
<td>The Brandon Centre</td>
<td>Pulse @ LIFT</td>
</tr>
<tr>
<td>Pulse @ The HIVE</td>
<td>Pulse @ CANDI</td>
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<tr>
<td></td>
<td>Pulse @ Platform (ceased in Dec 16)</td>
</tr>
</tbody>
</table>
In addition, Pulse have been running a number of pop-up clinics in both boroughs, for example in hostels, youth centres, the Arsenal community hub and the Red Cross. These sessions are aimed at reaching more vulnerable young people and those less likely to access sexual health services. Depending on the setting, the outreach nurse can offer full testing, contraception and advice.

Below is an overview of patients seen in the CAMISH clinics from April 2016 – March 2017; there were total of 12, 444 individuals and 15,824 patient visits.

38% of the patient visits took place at Brook Euston, 33% at Pulse, 25% at the Brandon Centre and 4% in our outreach clinics. Similar to 2015/16, overall, 15% of our patients were young men compared to 84% young women.

Most patients, 59%, were aged 20-24 years old, followed by 23% 18–19 and 13% 16-17 years old. Around 3% were 15 and 1% and less were 14 years old and under (see graph below).

42% of patients were Camden residents, 31% Islington and 27% from other boroughs.
As expected, Chlamydia ranked the highest amongst the sexually transmitted infections diagnosed this year with 9.49% of all Chlamydia tests showing a positive result, in comparison with 1.71% for Gonorrhoea. In addition, Pulse diagnosed 41 Trichomonas Vaginalis infections and are currently the only network clinic offering this test. Other infections found across all services were Herpes and warts with 73 and 52 patients presenting with symptoms respectively.

The majority of young women who had a positive pregnancy test opted for a termination (TOP).

See graphs below for information on infections, pregnancies and contraception.

### Infections diagnosed in 2016/17

<table>
<thead>
<tr>
<th>Infection</th>
<th>Tests</th>
<th>Positive Tests</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chlamydia</td>
<td>5469</td>
<td>519</td>
</tr>
<tr>
<td>Gonorrhoea</td>
<td>5451</td>
<td>93</td>
</tr>
<tr>
<td>HIV</td>
<td>1674</td>
<td>1</td>
</tr>
<tr>
<td>Syphilis</td>
<td>2016</td>
<td>0</td>
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</tbody>
</table>

### Number of pregnancies in 2016/17

<table>
<thead>
<tr>
<th>Type</th>
<th>Tests</th>
<th>Positive result</th>
<th>TOP referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnancy tests</td>
<td>2039</td>
<td>220</td>
<td>167</td>
</tr>
</tbody>
</table>

### Contraception given in 2016/17

- Emergency IUD: 4, 1570
- Emergency oral contraception: 443
- Implant: 48
- IUD/IUS: 701
- Depo Provera Injection: 5
- Other (diaphragm, natural FP): 5325
- Pills, patch, vaginal ring: 6693
- Condoms: 0

### 6.1 Brook Euston

Brook Euston has seen some big changes over this last year. Laura Jones took over as Service Manager and Emma Valentine returned as Operations Manager in August 2016.
Brook also appointed Helen Marshall as the new CEO and the organisation recently underwent a complete re-branding.

In the clinic we continue to be challenged with recruitment of nursing staff and we have had six members of staff go on maternity leave in 2016/17! This was reflected in the reduction of young people seen in our clinic over the year.

In December we had an inspection by the CQC. As anyone who has undergone an inspection will know, it was not an easy process; however all our staff pulled together and we are extremely proud of the results. The inspectors personally commented that although, they do not rate non-NHS organisations, had they been able to we would have achieved the “outstanding” rating.

We continue to look at new ways to engage young people and this year has seen us forge better working relationships with our Brook education and wellbeing partners culminating in our first Sexual Health Education Day which was well received.

Our new computer system, Blithe Lilie, will be incorporated into the clinics next year, making data capturing and reporting more effective and informed.

Laura Jones, Service Manager, Brook

6.2 The Brandon Centre

There have also been many staff changes at The Brandon Centre with Charlotte Reynolds our operations manager and Shirldon Barthelmy our C-Card and Workforce Development Coordinator leaving the organisation in 2017 following 8 years and 5 years of service respectively. The contraception and sexual health service has a new service manager, Chioma Onyekwuluje, and C-Card and Workforce Development Coordinator, Lildonia Lawrence, who both started in the last quarter of the year. The Brandon Centre will also be appointing a new director in 2017 as Geoffrey Baruch is stepping down after 25 years of service.

Our clinic activity has increased with more young people than ever before (2020 individuals) using the clinic services during 2016/17, recording 4046 attendances. This represents a 15% increase in activity compared to last year. A quarter of the young people using the centre were young men. Our user feedback shows that most of these young people appreciate the ease of access, the range of services provided, and the respectful and confidential manner with which they are treated.

Chioma Onyekwuluje, Service Manager, The Brandon Centre

6.3 Pulse N7

The second year of service delivery at Pulse has been seamless; we have resolved the IT issues experienced in the first year and have a fully supported IT system. Our partnership with the network has gone from strength to strength and we are able to offer
an optimal service to the young people of Camden and Islington. Our drop in clinic on Holloway road remains a very popular and well-attended service. Demand regularly outstrips our capacity and we have to ask clients to return another day. These patients are provided with a 48hr access card, where they will be prioritised when they return. All young people who attend are offered the opportunity to sign up for the C-Card and are provided with condoms, Camish network leaflets with details of all the clinical services across the network neatly packaged in the Camish Oyster card wallet. We have also developed smoking cessation cards to give to patients to provide easy access to stop smoking services. Since our services extended the age range to 24 two years ago, we see a lot more clients over 21 years old; we have introduced a fast track triage system to enable clients under 18 years old with vulnerabilities quick access to a health care professional. We have attempted to implement self-managed STI screening kits but the model did not fit with our young people’s needs and we are currently revising this.

We are aware of the additional vulnerabilities attached to young people who are not in education, employment or training and the targets to improve this and we have created a jobs bulletin folder so that young people can find out about job opportunities whilst waiting in clinic.

Pulse also received a great compliment from Cllr Joe Calouri who visited the service:

“I am incredibly impressed with the services provided at Pulse but crucially also the degree of sensitivity and understanding they show toward the needs of vulnerable young people. At a time in which other Boroughs are cutting provision I am encouraged that our young people have such an outstanding service available to them during some of the most difficult moments of their young lives.”

Rosemary Gordon, Lead Nurse, Homerton

6.4 Pulse Outreach Clinics and Clinic in a box

Since the launch of the network Pulse have been lucky to have maintained stable frontline staff which has been vital to our ongoing work especially within our outreach satellite clinics; building and maintaining relationships with potential partners directly impacts on our ability to be effective. Pathways have been developed across a number of service areas into level 3 GUM services which enables a seamless transition into local services for some of the most vulnerable groups. Our outreach nurse has started working with young refugees and has continued to visit hostels offering a ‘clinic in a box’ service to some of the most vulnerable groups in society. The nurse also meets regularly with looked after children professionals and substance misuse workers which increased the number of clients from these groups accessing our services through referrals.

We have started seeing an increase in young men and clients with learning disabilities attending the Pulse clinic at the HIVE; as young men are often underrepresented in clinic attendances this demonstrates the success of the HIVE at targeting some of the more
difficult to reach groups, we hope to see similar increases across all the Hubs as we work with more professionals and share information about the network across the boroughs.

Our clinic at Platform closed at Christmas due to a drop in attendances; we are constantly reviewing our sites to ensure that we are located where there is a demand for services.

We are continuing to look at ways of improving our service and would like to develop more self-managed options for clients. We plan to continue to develop our frontline staff so that they are able to offer some additional services with further training.

7. **Sex and Relationships Education in Secondary Schools**

In 2016/17, the network delivered 169 Sex and Relationships Education (SRE) sessions across 13 secondary schools in Camden and Islington. In addition, some schools and colleges wanted sessions for students with learning disabilities and difficulties.special educational needs (LDD/SEN), bringing the total number of hours to 202 across 18 sites.

With the support of the Health Improvement Leads, we also reviewed the offer to secondary schools to encourage advance booking, avoid drop-down days and uptake of professional training opportunities. We also developed new publicity and an online booking system, which are now live on the CAMISH website. Popular sessions requested this year were consent, pornography, CSE and healthy relationships. We noticed that many young people lack skills around safer sex (e.g. condom negotiation, condom use and how to access a clinic) and that schools are focusing on year groups outside of year 9 and 10.

Compared to last year we delivered fewer SRE sessions, largely due to staff changes and the fact that the Camden school nurses are no longer able to co-deliver SRE with us. Successes this year include streamlining of SRE protocols and quality assurance processes. All CAMISH staff delivering SRE attended a 2-day training course, an SRE coordination protocol was finalised, and administration processes are quicker and easier for schools and the network, resulting in increased capacity to deliver sessions. Going forward, we would like to arrange for more young people to visit our clinics to feed back to their peers as this has been very positive, and to better respond to the needs of young people by considering a wider, but fair, offer to schools and by strengthening our evaluation processes and gathering input from young people.

Belinda Narayanan, CAMISH SRE Coordinator, Brook

<table>
<thead>
<tr>
<th>Patient Feedback</th>
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<tr>
<td>99% of patients said they felt listened to and received enough information to make a decision during their visit.</td>
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<tr>
<td>98% said they were made to feel welcome</td>
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<tr>
<td>93% would recommend our services to their family and friends</td>
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<tr>
<td>Staff were described as friendly, helpful, supportive, non-judgemental, well-informed and having a positive attitude.</td>
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</tbody>
</table>
8. **Sex and Relationships Education out of schools (Targeted and 1-1 Work)**

Brook are the network lead on targeted education work and delivered a total of 71 small group sessions to 24 groups in Camden and Islington. A large number of requests were for young people with LDD/SEN in and out of schools, and also from youth provisions that have identified young people at risk, for example, of CSE, and with concerning attitudes towards consent and online relationships. A number of these sessions were delivered in collaboration with Homerton’s clinical outreach nurse and health promotion worker. There is currently high demand for targeted work. In Camden in particular, we have booked several long programmes for 2017-18 and expect to receive more requests. Islington services appear to be more difficult to engage and we aim to improve this in the coming year. We also plan to review our approach to peer education as we have had limited uptake this year; however, we are aware that peer education is very successful in creating behaviour change if delivered appropriately.

This year we also reviewed our 1-1 offer in the Camden and Islington youth offending services (YOS) and our 1-1 worker now spends two days in Camden, two in Islington and one day taking referrals from the CAMISH network or other organisations. Over the year, the 1-1 worker saw 95 young people and delivered 130 sessions in total, focusing on a range of topics from basic sexual health to values and attitudes towards sex and relationships.

Belinda Narayanan, Education and Wellbeing Coordinator, Brook

9. **The C-Card Scheme (Come Correct Scheme)**

The C-Card scheme, coordinated by the Brandon Centre, provides young people (aged 13 to 24) with access to free condoms from ‘C-Card outlets’ (youth clubs, colleges and other community youth services). Once registered for the scheme, young people are provided with a card, which allows them easy access to free condoms from any C-Card outlet in Camden, Islington, or any other borough that participates in the London-wide scheme.

In the last year we provided training and support to staff in 57 C-Card outlets throughout Camden and Islington. As a result, in 2016/17 we achieved a 7% increase (2323) in new registrations and 32% (2160) in repeat attendances for condoms. 93 young people accessed Chlamydia and Gonorrhoea screening at a C-Card site and we achieved an increase of 10% in return Chlamydia and Gonorrhoea screens across 75% of sites.

Anonymous feedback collated from young people accessing C-Card scheme included:

- “It is very convenient and quick”
- “It is safe and free”
- “It’s quick and effective”
- “It’s quick and easy”
- “Confidential and friendly”
10. **Training for professionals**

The network offers free training on sexual and reproductive health issues that affect young people to staff working with young people across Camden and Islington. Training aims to help staff and organisations develop more confidence when dealing with sexual health issues, feel better placed to advise and signpost young people to other services or become a C-Card provider themselves. Additional training is provided where specific emerging themes have been identified by the workforce.

Last year we delivered seven level 1 and 2 training sessions across the two boroughs, training 69 participants overall. 53 were trained in ‘Introduction to Talking to Young People about Sexual Health’ and 19 went on to train in ‘Come Correct C-Card Training and they became C-Card practitioners. We also delivered Chlamydia and Gonorrhoea training to 34 staff members enabling them to offer screening to young people who use their services.

In addition, we delivered the following bespoke training for a total of 54 professionals: “Puberty, Sex and Relationships”, “Young People and Pornography” and “Young People and Relationships”. We continue to respond to needs based on feedback from professionals in order to develop further training; as a result we are in the process of refreshing the “Young People and Pornography” training.

11. **Joint Working**

As the network has strengthened considerably this year, we have seen increasing crossover between our “specialisms” (i.e. clinical outreach, C-Card, Chlamydia/Gonorrhoea screening, health promotion and SRE in youth clubs/hostels work) this year. Being able to provide multiple services and support each other’s delivery within the network is positive and beneficial to the staff and young people that attend our services. We will continue to support each other’s work going forward and are currently reviewing the way that we report this to accurately reflect the work that is being delivered.

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**Sexual Health Campaigns**

This year the network came together again to run a series of events during National Sexual Health Week, National HIV Testing Week and Valentines/LGBT History week. Each service was charged with the planning and implementation of events in youth centres and colleges in Camden and Islington for one of the campaigns; the aim was to raise awareness of issues pertaining to sexual health and the CAMISH services; our local young people’s drugs and alcohol service and smoking cessation teams also joined us to co-deliver stalls.

The sessions were used to talk to young people about the services available to them as well as to provide education, C-card registrations, condom distribution and STI screening. The Young people’s participation coordinator also used the opportunity to engage young people and obtain feedback on our services. All three campaigns were a great success and reached more young men and a younger age group than we usually see in our clinics.
SRE Sessions
Towards the end of the year we delivered an SRE session delivered in a school in Camden which resulted in approximately 30 young people from that school attending our clinic at The Hive. It was really rewarding to see this direct result of our work and we hope to capture more data like this in future.

Next year
Next year, Brook are planning to take a “network approach” when promoting our services to schools and outreach sites by supporting them to view SRE as a longer-term investment, rather than a one-off session, which could include a range of services offered by the network. For example, we would like to offer schools a peer education programme, a C-Card stall at lunch, training for teachers, SRE and a clinic visit where students feedback in assembly.
# Appendix A

## Clinic Opening Times

<table>
<thead>
<tr>
<th>Brandon Centre</th>
<th>Brook Euston</th>
<th>Pulse</th>
<th>Pulse @ the HIVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>26 Prince of Wales Rd London NW5 3LG</td>
<td>92–94 Chalton St London NW1 1HJ</td>
<td>164 Holloway Rd London N7 8DD</td>
<td>18 Harben Parade Finchley Rd London NW3 6JP</td>
</tr>
<tr>
<td>Tel: 020 7267 4792</td>
<td>Tel: 020 7387 8700</td>
<td>Tel: 020 7527 1300</td>
<td>Tel: 020 3198 0520</td>
</tr>
<tr>
<td><a href="http://www.brandon-centre.org.uk">www.brandon-centre.org.uk</a></td>
<td><a href="http://www.brook.org.uk">www.brook.org.uk</a></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mon – Thu 09:30-19:00</td>
<td>Mon – Fri 12:00-18:00</td>
<td>Mon - Fri 12:00-18:00</td>
<td>Thu 15:00-18:00</td>
</tr>
<tr>
<td>Fri 09:30-17:00</td>
<td>Sat 12:00-14:00</td>
<td>Wed 13:30-18:00</td>
<td></td>
</tr>
<tr>
<td>Sat 10:00-15:00</td>
<td></td>
<td>Sat 12:00-14:00</td>
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</tbody>
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## Camden & Islington Young People’s Sexual Health Network

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