

Croydon Sexual Health Strategy 2011 – 2016

INTRODUCTION	2
POLICY CONTEXT	2
AIMS OF THE STRATEGY	3
STRATEGIC VISION	3
PURPOSE OF THE STRATEGY	3
DEVELOPMENT OF THE STRATEGY.....	4
NATIONAL AND LOCAL TARGETS AND INDICATORS	5
SEXUAL HEALTH NEEDS IN CROYDON	6
CROYDON POPULATION DEMOGRAPHICS.....	6
SEXUALLY TRANSMITTED INFECTIONS.....	6
TEENAGE PREGNANCIES	8
SPECIFIC POPULATION GROUPS.....	8
STRATEGIC OBJECTIVES.....	9
COMMISSIONING AND MANAGEMENT FRAMEWORK	10
STRATEGIC OBJECTIVES.....	10
SEXUAL HEALTH SERVICES IN CROYDON.....	12
GENITO-URINARY MEDICINE (GUM)/ COMMUNITY AND SEXUAL HEALTH SERVICES	12
HIV SERVICES	13
TERMINATION SERVICES	14
PRIMARY CARE SERVICES	14
SERVICES FOR YOUNG PEOPLE	14
SERVICES FOR SPECIFIC GROUPS	15
THIRD SECTOR PROVISION	15
STRATEGIC OBJECTIVES.....	15
SEXUAL HEALTH PROMOTION AND EDUCATION DAN TO SEND SOME INPUT.....	16
STRATEGIC OBJECTIVES	18
WORKFORCE PLANNING AND DEVELOPMENT.....	19
STRATEGIC OBJECTIVES.....	20
PUBLIC ENGAGEMENT AND PATIENT INVOLVEMENT	21
ACTION PLAN.....	22

1. Introduction

The Croydon Sexual Health Strategy has been developed to improve the sexual health of people living in Croydon. The strategy proposes several approaches, such as, health promotion, education and development of specific services.

The World Health Organisation (WHO) defines good sexual health as “a state of physical, emotional, mental and social well-being related to sexuality; not merely the absence of disease, dysfunction or infirmity.”

The Croydon Annual Public Report 2010¹ has further defined health and wellbeing as “more than the absence of disease; it is the ability for everyone in Croydon to fulfil their potential, make a contribution, and be resilient to life’s challenges.”

Sexual ill health costs the NHS more than £700 million a year.² Appropriate investment in sexual health services can deliver health care savings; for every £1 spent on contraceptive services £11 is saved.³

It is important to reduce sexual health inequalities and to maximise the health of people of Croydon, as well as normalise pleasurable and safe sexual experiences and relationships which are free from discrimination, coercion and violence.

1.1 Policy context

Sexual health is a high public health priority in the United Kingdom. This reflected by the national policies and strategies designed to improve sexual health services. The [National Strategy for Sexual Health and HIV](#)⁴ (2011) aims are to:

- reduce transmission of Human Immunodeficiency Virus (HIV) and sexually transmitted infections (STIs)
- reduce the prevalence and incidence of undiagnosed HIV and STIs
- improve health and social care for people living with HIV
- reduce stigma associated with HIV and STIs
- reduce unintended pregnancy rates
- create an infrastructure for excellence

A toolkit was developed and published in 2003 in response to the first National Strategy for Sexual Health and HIV. [Effective Sexual Health Promotion](#) (2003)

¹ Croydon Annual Public Health Report 2010, NHS South West London Croydon Borough Team.
<http://www.croydon.nhs.uk/publications/Documents/APHR%202010%20Version%20for%20internet.pdf>

² Department of Health (2005) Health Economics of Sexual Health: A Guide for Commissioning and Planning. London, DH.

³ Audit Commission 2003

⁴ Better prevention, better services, better sexual health: the national strategy for sexual health and HIV
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4058945.pdf

provides a range of practical tools which can be adapted to particular work settings, client groups and service users own levels of confidence, experience and skills.

In response to the 2008 mid-term review of the Independent Advisory Group on sexual health and HIV the government published [Moving forward: progress and priorities - working together for high quality sexual health](#) the following year. This outlined the progress made in improving sexual health since 2001 and responded to the national level recommendations put forward by the Independent Advisory Group.

[The London Sexual Health Programme](#) is funded by London's 31 Primary Care Trusts (PCTs) to improve the sexual health of Londoners through leading and strengthening Sexual Health Commissioning. An important report for the London Sexual Health Programme - [Sex and Our City](#) - was published in 2008 outlining the sexual health needs of Londoners and a map of services available. In 2009, the [London Sexual Health Framework](#) updated its predecessor from 2004 with a range of standards and sexual health indicators that can be used by PCTs.

In 2010, the Department of Health published the White Paper [Equity and Excellence: Liberating the NHS](#) outlining the new Coalitions vision of how the NHS should be set up to achieve maximum efficiencies; provide high quality services; be innovative in its approach to tackling inequalities and demands; and including an agenda on prevention.⁵ This announced the start of restructuring the NHS, which will have a big impact on the way in which current services are delivered locally.

1.2 Aims of the Strategy

The overall aims of the Croydon Sexual Health Strategy are to:

- Improve the sexual health of the population
- To reduce inequalities in sexual health
- Set targets in line with national priorities and monitor progress as appropriate to local populations
- Ensure prevention is integral to service delivery

1.3 Strategic Vision

The sexual health needs for Croydon will be addressed through the use and development of relevant services that are in line with national and local policies and targets. Health promotion and sexual health education will also play a key role in increasing sexual health awareness and helping people to make informed and responsible choices for their own health. The service provision will be consistent, evidence-based and delivered in a variety of clinical and community settings so that all individuals can have choice and access.

1.4 Purpose of the Strategy

The purpose of the Croydon Sexual Health Strategy is to:

⁵ Department of Health (2010). *Equity and Excellence: Liberating the NHS*. The Stationary Office LTD, July 2010.

- Address local priorities in sexual health as well as to meet local and national targets
- Ensure that sexual health services are comprehensive for the local population
- Allow for the inclusion and cross-referencing of other strategies
- Ensure and maximise best use of available resources
- Provide support for the delivery of local sexual health services
- Support all staff to develop their skills through work-based and other dedicated education and training programmes, in line with national priorities
- Co-ordinate local information campaigns with national information campaigns and ensure they meet good practice benchmarks.

1.5 Development of the Strategy

The Sexual Health Strategy has been developed based on the Croydon Joint Strategic Needs Assessment (JSNA) on sexual health 2010/11 which brought together information from service data and demographic data, as well as information from previous JSNAs, service reviews, user consultations and other related local documents. The strategy has been written with reference to national and regional strategies; and guidance.

The work has been jointly led by NHS South West London Croydon Borough Public Health and Croydon Council with the involvement of partners in the local sexual health economy. The development of work in this area is overseen by the Sexual Health and HIV Partnership Board who meet on a regular basis. The Board consists of representatives of Croydon Council, NHS South West London Croydon Borough, Croydon Centre for Sexual Health (CCSH), Contraception & Sexual Health Services, Primary Care, and the South West London GUM & HIV Clinical Services Network (SWAGNET).

2 National and Local Targets and Indicators

There are several national and local targets set for sexual health for Croydon. These include specific indicators that may be related to activity of service providers, diagnostic rates and timely access to services.

The Department of Health has set several targets, some which are national and others which Croydon must respond to locally. The specific activity indicators to be included are:

- Reduce the under 18 conception rate by 50% by 2010 (compared to the 1998 baseline rate)⁶, which would require a reduction to a rate of 29.6 conceptions per 1,000 or approximately 195 conceptions per year.⁷
- Review and monitor Chlamydia diagnostic rate from testing in both non-GUM and GUM settings and aim to achieve (or maintain) rates in the range from around 2,400 per 100,000 to 3,000 per 100,000 or higher in 2011/12, counting both GUM and non-GUM diagnoses made in the 15 to 24 year old age group.⁸ The target for 2010/11 was to screen 35% people aged 15 to 24 in Croydon.
- Achieve 90% uptake of antenatal HIV testing
- Reduce the number of newly acquired HIV and gonorrhoea infections
- The percentage of patients attending CCSH or genitourinary medicine (GUM) clinics who are offered an appointment to be seen within 48 hours of contacting a service, aiming to reach 100%
- The number of new diagnoses of gonorrhoea per 100,000 population to contribute to the reduction of infections by 25% by 2007
- All women who meet the legal requirements (up to 24 weeks) have access to abortion within 3 weeks of the first appointment with the GP or other referring doctor
- At least 75% of abortions that take place in a local area should be NHS funded
- Ensure access to abortion services under 10 weeks gestation to support early access to abortion and achievement of the standard set in the Sexual Health Strategy of a 3 weeks maximum waiting time⁹
- 100% of Gum clinic attendees to be offered an HIV test with a 60% level of uptake
- Reduce late diagnosis of HIV to 15% for March 2011
- All homosexual/bisexual men to be offered a hepatitis B vaccine after the first visit with a 90% level of uptake

⁶ Department of Health

⁷ Office for National Statistics and Teenage Pregnancy Unit, 2010

⁸ National Chlamydia Screening Programme, Feb 2011. Further to this statement, there is the continued expectation for PCTs to submit all chlamydia NAATs testing activity deriving from venues outside of GUM to the NCSP on a quarterly basis

⁹ Performance Indicator set by the Healthcare Commission

3 Sexual Health Needs in Croydon

Croydon has the largest population of any London borough and levels of deprivation vary significantly between wards. There are increased rates of diagnosis of sexually transmitted infections, such as Chlamydia, gonorrhoea and genital herpes in Croydon. The diagnosis of HIV at a late stage and the abortion and teenage pregnancy rates are higher than London and national averages. The strategy objectives include achieving national and local standards, focusing on vulnerable and high risk groups, and conducting health needs assessments for particular groups in the population.

3.1 Croydon Population Demographics

Croydon has both the largest resident population of any London borough (340,000) and also the largest population of children and young people aged 0-19 (90,000). 43% of Croydon residents are between 15 – 44 years old, where sexual activity is highest.¹⁰ There are an estimated 44,400 people aged 15-24 years old in Croydon.¹¹

Deprivation levels across Croydon vary considerably and Croydon includes some of the most and some of the least deprived areas in London. Deprived areas are concentrated in Croydon's major social housing estates and in the North of the area while wealth is mainly in the South. Outcomes vary enormously: there is an 11 year gap in life expectancy. On average, Croydon is slightly less deprived than the national average and considerably less deprived than London as a whole.

At 41%, the proportion of the population from Black & Minority Ethnic (BME) groups is similar to the London average (42%). This is expected to increase to 47% by 2018 and over 50% by 2026. Over 100 different languages are spoken in the borough.

3.2 Sexually Transmitted Infections

London has the highest prevalence of sexual ill health in the UK. The numbers of new diagnoses of herpes rose by 29% and Chlamydia and warts each rose by 8% between 2004 and 2008 in London. However, the number of new diagnoses of gonorrhoea decreased by 24% and syphilis decreased by 7% over the same time period.¹² Young people, black minority communities and men who have sex with men (MSM) are consistently identified as those who are most affected by STIs.¹³

Chlamydia has been the most commonly diagnosed STI at the CCSH at over the years analysed. Rates of infection are much higher in young people (16-25 years) than in other age groups. There was a 14% increase (since 2008) of new diagnoses of Chlamydia at the CCSH Hospital in 2009 which partly reflects the changes in screening and diagnostics of the infection.

As part of the National Chlamydia Screening Programme, Croydon achieved 25.7% screening coverage in 2010/11 for those aged 15-24 years. Positivity rates are

¹⁰ GLA London Plan Projection, 2009

¹¹ Office of National Statistics ONS estimates, 2009

¹² STI annual data tables 2008 London: Health Protection Agency

¹³ *Sex and our city* London: MedFASH, 2008

higher than the average for London, which partly reflects that Croydon is appropriately targeting the service to reach groups of young people at risk of infection.

The rate of gonorrhoea diagnosed at the CCSH rose by 3% from 2004 to 2009. The rate of diagnosis of 84 per 100,000 population was higher than the London (72.8) and England (29.7) averages. The increase in diagnoses is particularly noticeable in the 20-24 year age group.¹⁴

The number of cases of genital herpes diagnosed at the CCSH in 2009 rose by 73% from 2004. This is likely to reflect increased use of a more sensitive molecular test at Croydon University Hospital.¹⁵ The rate of diagnosis in 2009 was 79.3 per 100,000 population which was the same as the London average but higher than the England average (51.2).¹⁶

There was a decrease of 19% from 2008 in the diagnosis of genital warts at the CCSH in 2009. The rate of diagnosis for genital warts in Croydon was 111.5 per 100,000 population and was less than the London (163.6) and England (145.6) average.¹⁷

There were only a very small number of cases of syphilis (<10) diagnosed at the CCSH in 2009.¹⁸ The rate of diagnosis for Croydon was 6.1 per 100,000 population which was lower than London (14.1) but marginally higher than the England (5.5) average. Across the UK, men were six times more likely to be diagnosed with infectious syphilis than women. Of infected men who have sex with men (MSM), almost a quarter of those infected were also infected with HIV.

The prevalence of HIV in 2009 was 4.43 per 1,000 population for Croydon, compared to the London (5.24) and England (1.4) averages.¹⁹ 22% of patients accessing HIV care in 2008 were MSM and 59% were of Black African ethnicity.²⁰ The majority of those living with HIV in Croydon acquired the infection outside the UK.

In 2008, 40% of HIV patients were diagnosed late in Croydon compared with the London average of 30%. UK wide it is estimated that a third of those with HIV are undiagnosed.²¹

3.3 Abortions

Croydon continues to experience higher rates of abortions with variation in rates across the borough.²² The overall abortion rate in 2009 for Croydon was 27.0 per 1,000 women (aged 15-44), compared to 26.0 in London and 17.6 in England. The

¹⁴ STI annual data tables data from genito-urinary medicine clinics. 2009 London: Health Protection Agency

¹⁵ HPA Data from UK GUM clinic up to 2007 indicates continued increase in diagnosis of STIs. Health Protection Report (Serial online) 2008; 2; (29) HIV/STIs.

¹⁶ HPA data, 2009

¹⁷ HPA, Croydon University Hospital KC60 data

¹⁸ *ibid*

¹⁹ HIV in the United Kingdom: 2010 Report. London: Health Protection Agency, 2010

²⁰ SOPHID 2008

²¹ The UK Collaborative Group for HIV and STI Surveillance. Testing Times. HIV and other sexually transmitted infections in the UK: 2007. London: Health Protection Agency. Centre for Infections 2007.

²² Department of Health.2010.op.cit

percentage of conceptions for women aged 15-17 years leading to termination was 54%; a decrease from 59% in 2008.²³

In Croydon, just under half (49%) of all women undergoing an abortion in 2009 had undergone one or more previous abortions, compared with 42% of women in London and 34% in England. The proportion of repeat abortions in women aged 30 to 39 was over 60% and in those under 25 was 41%.²⁴ The proportion of repeat abortions by ethnic group is highest among women of black ethnicity (54%).²⁵

The main aims of the Croydon Repeat Abortion Strategy are to prevent unplanned pregnancies, reduce the number of unintended repeat conceptions in all age groups and provide accessible and equitable abortion services for the population of Croydon. This strategy supports the objectives from The National Strategy for Sexual Health and HIV (2001),²⁶ The Care of Women Requesting Induced Abortion (2004)²⁷ and Recommended Standards for Sexual Health Services (2005).²⁸

3.4 Teenage Pregnancies

Statistics released by the Office of National Statistics in February 2011 showed Croydon had seen the conception rate for women aged 15-17 years drop from a rate of 55.4 conceptions per 1000 during 2008 to 45.7 per 1000 during 2009. Croydon continues to maintain a reduction in its local under-18 conception rate with the rate of under-18 conceptions for the first quarter of 2010 recorded as 40.3 per 1000 girls. As a consequence, Croydon saw its under-18 conception rate drop by 22.7% from the 1998 baseline, and showed a drop of 17.5% from 2008 rates.

England and London have similarly seen drops in their under-18 conception rates with rates being at their lowest levels since 1998. The England rate of under-18 conceptions was 37.9 per 1000 girls for England and 39.7 per 1000 girls for London aged 15-17 years. However, Croydon has a higher rate on under-16 conceptions than London or England averages.

The Croydon Teenage Pregnancy Strategy 2011-12 covers eight key themes and includes a wide array of objectives covering issues such as strategic governance and commissioning, delivery of sex and relationship education in schools and colleges, delivery of young people focused sexual health services, targeted work with at-risk groups of young people and workforce development etc.²⁹

3.5 Specific Population Groups

In 2010, over 1000 children were looked after in care and more than half were unaccompanied asylum seeking children.³⁰ These young people are recognised as being vulnerable to risk taking behaviour, including early and unprotected sexual activity. Young people leaving local authority care between 16 and 25 are also at risk and particularly vulnerable.

²³ Office of National Statistics, ONS estimates 2011

²⁴ Department of Health.2010.op.cit

²⁵ Marie Stopes data

²⁶ Department of Health (2001)

²⁷ Royal College of Obstetrics and Gynaecology

²⁸ Croydon Repeat Abortion Strategy. Available at www.croydonobservatory.org

²⁹ Croydon Teenage Pregnancy Strategy 2011-12.

³⁰ Croydon Council data, 2010

Vulnerable adult groups identified in Croydon who are at an increased risk of acquiring STIs and blood borne viruses compared with the general population include homeless people, substance misusers, people with mental health problems, people with learning difficulties, asylum seekers, sex workers and victims of sexual violence and abuse.

Research into sexual risk behaviour among people with 'severe' mental health problems suggests that they are likely to engage in high-risk sexual behaviour, for a number of reasons, putting them at risk of sexually transmitted diseases.

The National Sexual Health and HIV Strategy highlights that 'sexual ill health is not equally distributed among the population', with gay men being identified as a high risk group. There has been little research carried out at national level on the sexual health needs of lesbian and bisexual women as they are deemed to be in a low risk category when it comes to sexually transmitted infections and HIV.

National data indicate that some Black and minority ethnic (BME) groups, especially younger black Caribbean, black African and other black population groups are disproportionately affected by STIs and sexual ill-health³¹.

There are particular barriers to accessing services for BME communities which, partnered up with the disproportionate numbers of HIV and teenage pregnancies amongst minority communities, makes this a crucial issue to tackle for Croydon. These barriers include language, taboo, and stigma. For this reason, understanding and meeting the needs of BME communities in Croydon is a challenge that needs to be met through better engagement of communities.

3.6 Strategic Objectives

The main strategic objectives are to:

- 3.6.1** Include standards for the quality of data collected and robust outcome measures into the sexual health strategy and commissioning of services
- 3.6.2** Prioritise the targeting of vulnerable and high risk groups with comprehensive sexual health care
- 3.6.3** Implement the Croydon Repeat Abortion Strategy and Action Plan
- 3.6.4** Implement the Croydon Teenage Pregnancy Strategy and Action Plan
- 3.6.5** Implement the Croydon HIV testing Strategy and Action Plan
- 3.6.6** Ensure all national and local targets and indicators are incorporated and measured
- 3.6.7** Carry out health needs assessments for those sections of the Croydon population whose sexual health needs are not clear for example, sex workers, refugees and asylum seekers and trafficked people

³¹ Chapter 6 STIs SWL annual report.

4 Commissioning and Management Framework

The main commissioners for sexual health services in Croydon are NHS South West London Croydon Borough Team and Croydon Council. The goals of this Strategy are to ensure standards are implemented and sustainable, to improve service procurement and to facilitate partnership working of service providers.

The recent consultation papers released to accompany the public health White Paper [Healthy Lives, Healthy People](#)^{32,33} indicated that the proposal is for sexual health (which includes all sexual services apart from contraceptive services) to be funded from the new public health budget via local authorities.

In line with Croydon's Strategic Plan for Sexual Health and HIV 2010-2015, there is a commitment to develop integrated sexual health services which includes provision of holistic intervention, streamlined care pathways and efficient use of limited resources through better partnership work across all sectors.³⁴

NHS South West London Croydon Borough Team and Croydon Council continue to be the main commissioners for local sexual health services in line with the three tiered model set out in 'Better Prevention, Better Services and Better Sexual Health' (Appendix A)³⁵ and the overarching commissioning standards set out in the London Sexual Health Strategic Framework (Appendix B).³⁶ A list of current commissioners for individual services is provided in Appendix C. Croydon Contraceptive and Sexual Health service is managed by Croydon Health Services NHS Trust and provides the opportunity for integration between acute based CCSH and community based reproductive and contraceptive services.

The Croydon Sexual Health and HIV Partnership Board and the Children and Families Partnership: Be Healthy Sub-group ensures that the National Sexual Health and HIV Strategy and the London Sexual Health Strategic Framework are implemented at local level.

4.1 Strategic Objectives

The main Strategic Objectives are to:

- 4.1.1 Implement the standards of the London Sexual Health Strategic Framework in Croydon
- 4.1.2 Ensure sustainable commissioning arrangements for sexual health in Croydon
- 4.1.3 Improve procurement arrangements to ensure efficiency, effectiveness and value for money through better performance arrangements focused on outcomes

³² Department of Health (2010). *Healthy Lives, Healthy People: Our Strategy for Healthy People in England*. The Stationary Office LTD, November 2010.

³³ Department of Health (2010). *Healthy Lives, Healthy People: consultation on the funding and commissioning routes for public health*. December 2010

³⁴ Document available from www.croydonobservatory.org/ihaw/

³⁵ Department of Health (2001). *Better Prevention, Better Services and Better Sexual Health-the national strategy for sexual health and HIV*. London. Department of Health

³⁶ London Sexual Health Strategic Framework 2009, London Sexual Health Programme

- 4.1.4** Review the Sexual Health and HIV Partnership Board and supporting Task Groups to facilitate partnership working
- 4.1.5** Investigate the cost-effectiveness of sexual health programmes in comparison with other NHS commissioning groups and examples of best practice

5 Sexual Health Services in Croydon

There are a range of sexual health services available in Croydon that provide a role in the promotion, prevention, diagnosis, treatment and advice on sexual health problems. Services include contraceptive care, genitor-urinary medicine, HIV care, abortion care and services for young people and specific groups. The aims of this Strategy are to integrate service provision, improve access and uptake of the service.

There are a range of sexual health services available in Croydon that are currently being integrated to provide a role in the promotion, prevention, diagnosis, treatment, advice and counselling of sexual health. They are held in different parts of the borough and may offer evening and weekend clinics. Services may be delivered through statutory, commissioned or voluntary organisations. They may provide a range of service level provision (Appendix A) and specialist services, for example, sessions for young people aged 25 and under.

A full list of available services provided is described in Appendix C.

5.1 Contraceptive Services

A number of contraceptive services across the borough offer various contraceptive methods, including condom supply, emergency hormonal contraception (EHC) and Long Acting Reversible Contraception (LARC). LARC methods are found to be more cost effective than the combined oral contraceptive pill.³⁷ According to recent data it is believed that 19.8% of women in Croydon are using oral contraception and 3.6% are using LARC methods³⁸.

Key aims of this Strategy are to reduce the number of unintended pregnancies and reduce the incidence of STIs. Therefore it is essential that individuals can access contraceptive services that provide advice on all contraceptive methods available, free provision of all methods and ongoing support for contraception and STI screening.

5.2 Croydon Centre for Sexual Health (CCSH)/ Community and Sexual Health Services (CASH)

The CCSH is based in Croydon University Hospital and is open to Croydon residents as well as people from other boroughs. Patients can wait to be seen, or telephone to book an appointment within 48 hours of initial contact. Services including advice, information, testing and treatment for all STIs, partner notification, emergency contraception, and condom supply are available.

In 2006 the Department of Health introduced a national target to improve access to CCSH to reduce the rise in STIs across the country.³⁹ This has been identified as a priority in the Operating Frameworks for the NHS in England and the Croydon JSNA 2010/11.

³⁷ Department of Health (2003) Effective Commissioning of Sexual Health and HIV Services. London Department of Health

³⁸ Long Acting Reversible Contraception: cost template (2006) National Institute for Health and Clinical Excellence <http://guidance.nice.org.uk/CG30/CostTemplate/xls/English>

³⁹ National Support Team for Sexual Health, DH (2006). 10 High Impact changes for Genitourinary Medicine 48-hour Access, London, Department of Health

The CASH service is based at the Edridge Road Community Health Centre. Services are also available at outreach clinics at Parkway Health Centre in New Addington. The service provides advice, information and testing for Chlamydia and HIV, all methods of contraception including LARC, with specialist consultant-led problems referrals, psychosexual medicine counselling and a domiciliary service with intensive input for women already at risk of pregnancy.

The National Chlamydia Screening Programme (NCSP) in England was established in 2003. It is available at various services in Croydon and offers screening, treatment and partner management and prevention to sexually active young men and women aged 15-24 years.

Reducing the prevalence of Chlamydia among young people aged 15-24 is currently prioritised as a Vital Signs Indicator (VSI) with a new target based on Chlamydia diagnosis rates per 100,000 young adults aged 15-24 years. The NCSP recommends that 60% of screens should come from core services and has recently indicated that testing undertaken in CASH will now also contribute to achievement of the target.

5.3 HIV Services

HIV testing and counselling is available in Croydon at the CASH and CASH services. There are further services providing outreach testing, counselling, respite and support services. There is a dedicated HIV team that manages HIV positive individuals including the facility for inpatient care.

The UK National Guidelines on HIV Testing 2008 recommend that HIV testing should be a routine 'opt-out' strategy in general medical admissions and new registrants at GPs where the local prevalence is greater than 2 per 1000 population.⁴⁰

The Strategy aims to achieve greater uptake of HIV tests and diagnosis of HIV positive individuals at an early stage of their infection through enhancing the provision of and access to HIV testing and encouraging normalisation of HIV testing. Furthermore, HIV testing to be routinely offered to higher risk groups is recommended.³³ Identified high risk groups include men who have sex with men (MSM) and men and women of African Origin.⁴¹ Services are also provided for parents, partners, and young people infected and affected by HIV. Advice and advocacy services to support those infected with HIV are also provided, as well as emotional and peer support groups.

A number of people who have HIV also require differing elements of social care, due to the debilitating nature of their illness. This is provided by a team of care managers in the Department of Adult Services and Housing, as well as by some services in the third sector. Care management includes assessing need, liaising with housing providers, legal assistance, respite and convalescence, or social support.

⁴⁰ British Association for Sexual Health and HIV (BASHH), British HIV Association (BHIVA) and British Infection Society (BIS) Guidelines for HIV Testing 2008.

<http://www.bhiva.org/documents/Guidelines/Testing/GlinesHIVTest08.pdf>

⁴¹ SOPHID, 2009 : In Croydon, 21% of patients accessing HIV care in 2009 were men who have sex with men and 57% were of Black African ethnicity

The Croydon HIV Testing Strategy builds upon the key priorities and objectives outlined in this Strategy and reflects the key findings from the Croydon JSNA 2010/11 on Sexual Health.⁴² The actions include 'opt-out' testing in healthcare settings; targeted testing of higher risk groups and health promotion.

5.4 Abortion Services

The main provider of abortion services in Croydon is Marie Stopes International. Primary care services such as general practices and most pharmacies in Croydon offer emergency hormonal contraception (Level 1). Local services are organised to enable elective abortions to be provided at as early a gestation as possible (less than 12 weeks). When later abortions are needed, provision is available up to the maximum legal time limit of 24 weeks (except for abnormalities).

5.5 Primary Care Services

The primary care services are general practice and community pharmacies and provide essential and enhanced sexual health services (Appendix C). All GP practices provide basic contraceptive services, sexual health promotion and advice, testing for symptomatic patients and referrals as necessary for specialist sexual health services. GP practices vary in the provision of services especially around LARC methods and HIV support.

Community pharmacies play an important role in promoting access to contraception for people under 21 years and signposting to appropriate sexual health services in Croydon.

There is potential to expand both these service providers to offer enhanced sexual health provision at Level 1 for all age groups. The Strategy aims for increased access and improved sexual health service provision for all age groups at a community level developed as part of an integrated shared care pathway.

5.6 Sexual Health Services for Young People

Croydon provides a wide range of sexual health services particularly targeted at young people. These range from dedicated CASH and CCSH clinics for young people; sexual health drop-ins in colleges and other targeted settings, enhanced sexual health services in pharmacies, dedicated LARC clinics and a young people's domiciliary contraceptive service. Young people are also able to access universal sexual health services offered by local community, primary and acute based services.

An enhanced teenage health drop-in service is currently being piloted in one of Croydon's local secondary schools and, if successful, then the development of additional services will be explored.

Croydon also offers free condoms to all young people via the local C-Card Scheme. This service is available from a wide range of agencies, including health, local authority and voluntary sector services. Further expansion of the scheme is a local priority.

⁴² Croydon HIV Testing Strategy. Document available from www.croydonobservatory.org

5.7 Services for Specific Groups

Croydon offers services for specific groups especially those at risk or vulnerable. These include specialist assessment services for all new unaccompanied asylum seeking children, rape and sexual assault victims, the homeless, refugee and asylum seekers.

There is currently limited work around the sexual health and service requirements of vulnerable groups in Croydon. The Croydon JSNA 2010/11 recommends further investigation of service use and needs; sexual health education and relevant workforce training to help deliver these needs.

5.8 Third Sector provision

Croydon has a variety of sexual health services provided by the third sector. These include advice and support services, advocacy services, counselling and health promotion. These organisations are supported to ensure services designed for specific client groups, e.g. young people.

5.9 Strategic Objectives

Strategic objectives are to:

- 5.9.1** Develop and increase integrated sexual health service provision at levels 1 – 3 in the community
- 5.9.2** Increase access to contraception for all ages to reduce unintended pregnancies, repeat abortions and STIs
- 5.9.3** Improve uptake of contraception in all sexually active age groups, prioritising LARC methods
- 5.9.4** Consider future antenatal screening to include testing for other sexually transmitted infections other than HIV, Syphilis, Rubella and Hepatitis B if required at local level
- 5.9.5** Increase the number of sites to provide access of condoms through the C-card scheme
- 5.9.6** Continue to deliver the Chlamydia Screening Programme targeting sexually active young people aged 15-24 years and vulnerable adults
- 5.9.7** Implement “You’re Welcome” Quality Standards to improve patient experience for young people
- 5.9.8** Deliver targeted HIV promotion/testing through outreach and integration into core services
- 5.9.9** Reassess HIV service provision taking into account the increase in numbers tested and diagnosed as well as the reality that HIV has evolved into a long term condition
- 5.9.10** Reduce health inequalities through targeted outreach HIV testing and contraceptive services to identified high risk groups
- 5.9.11** Implement the Croydon HIV Testing Strategy and deliver targeted HIV promotion/testing through outreach and integration into core service

6 Sexual Health Promotion and Education Strategy

Sexual health promotion is an important way of supporting positive sexual health and reducing differences between individuals and communities. It can include providing information, support and also sexual and relationship education. The Croydon Sexual Health Promotion and Education Strategy aims to provide sexual health promotion to all Croydon residents and targeted sexual health promotion to meet the needs of the borough's different populations including vulnerable adults.

Sexual health promotion has been defined by the Department of Health (2003) as 'any activity which proactively and positively supports the sexual and emotional health and well-being of individuals, groups, communities and the wider public and reduces the risk of HIV transmission'.

Sexual health promotion involves a wide range of activities and settings which can be aimed directly at an individual or group or indirectly at professionals, institutions and service providers.

A key component in improving sexual health for the local population is ensuring that sexual health is promoted and that sexual health education is provided. This would include the provision of targeted information, support and signposting with a focus on self care and management and also the provision of sexual health education.

Croydon Sexual Health Promotion Strategy aims to respond to the specific needs of local populations or groups within Croydon that require targeted interventions, because they are at higher risk of poor sexual health, are identified as being particularly vulnerable or have particular access requirements. However it also aims to be a vehicle for promoting the sexual and emotional health and wellbeing of all Croydon residents. The Croydon Sexual Health Promotion Strategy builds from the key issues outlined in this Strategy, the JSNA 2010/11 and mapping of current sexual health promotion activities in Croydon.

6.1 Croydon Wide

All Croydon adults should have an understanding of key sexual health issues to support them in making informed decisions about their sexual health, and should be provided with accessible, comprehensive signposting to sexual health services.

One aim of the Croydon Sexual Health Strategy is to improve local health promotion initiatives through the use of local media, social media, or via initiatives in the workplace, or mainstream local authority services, and in healthcare settings such as pharmacies and general practices. Given the increasing public health function of local government, Croydon Council will provide a central role in promoting sexual health in the borough.

6.2 Young People

It is widely recognised that it is essential for all young people to have access to high quality information about sex and relationships and support to develop skills, confidence and appropriate values.

All secondary schools are encouraged to provide a comprehensive Sex and Relationship Education (SRE) programme as part of the Personal Social and Health Education (PSHE) curriculum. Department for Education and Employment guidance (2000) states: subject areas to be covered are puberty, menstruation, contraception, abortion, safer sex, HIV/AIDS and STIs; the needs of all people should be met

regardless of sexual orientation and ethnicity and these should include children with special needs and learning difficulties.

In Croydon, the Sex and Relationship Task Group works with a wide variety of local partners to ensure SRE is delivered effectively within school and non-school settings. The local Healthy Schools and Teenage Pregnancy Teams along with Public Health colleagues provide specialist advice and guidance to local teaching staff and PSHE Leads in this area.

Additional work has also been carried out with local colleges to ensure the delivery of high quality SRE programmes for further education students. Assistance and guidance has been provided to support local colleges in the development of their local SRE policies and programmes. As a consequence, many interventions have been developed and delivered in Croydon's colleges over recent years. These include the delivery of SRE and targeted prevention programmes, the delivery of college based young peoples' sexual health drop-in clinics, regular sexual health campaigns and the development of peer education initiatives.

There is also a wide range of sexual health promotion interventions aimed at young people taking place outside Croydon's educational settings and these sexual health initiatives are part of Croydon's Teenage Pregnancy Strategy. Some examples of local interventions that have been developed to further these objectives include borough-wide sexual health media campaigns; the production and dissemination of sexual health information and resources; development of a sexual health information website for young people that live in South West London; targeted prevention programmes for young people identified as being at greater risk of poor sexual health; sexual health outreach and information services; targeted sexual health drop-in clinics; seminars and a wide range of training for local professionals on a range of young people's sexual health issues including teenage pregnancy.

Additionally, as part of the National Chlamydia Screening Programme which is aimed at 15-24 year olds, Croydon has carried out a range of sexual health promotion activities including: targeted mail-outs; poster campaigns in buses, cinemas and leisure facilities; web information; branded materials; outreach work.

6.3 Croydon Public Health Training Programme, Health Library and Resources Service

Croydon's Public Health Department runs courses relating to national and local public health priorities, including sexual health. They are free to individuals and organisations involved in promoting the health of people in Croydon. Croydon Health Library and Resources Service operate a public health library and the Resources Team have a wide range of sexual health leaflets, posters, teaching packs and videos and provide support from staff on how to use them effectively and also a free delivery service.

6.4 Promotion at Sexual Health Services

Sexual health promotion is well integrated with the other activities of Croydon's sexual health services. Croydon Centre for Sexual Health (CCSH) has Health Advisors providing sexual health promotion, safer sex education and counselling to all groups of patients attending the clinic.

CASH Services provide information, advice and signposting relating to STIs. CASH provides education to GPs and their practice nurses, pharmacists, paediatricians, gynaecologists and staff at CCSH about contraceptive decision-making. The pharmacists at the GP led health centre, cover wider health promotion issues during 1 to 1 sessions e.g. smoking cessation.

CCSH & CASH are part of a clinically managed regional network - South West London HIV & Sexual Health Clinical Services Network (SWAGNET). This has a sexual health promotion subgroup allowing members to share good practice, resources and training. There are targeted sexual health promotion activities including events, literature and training both for members of the network and other healthcare workers. SWAGNET has set up a web portal at www.swish.nhs.uk to direct patients to appropriate health and information services.

Other services as Marie Stopes International, South London HIV partnership and community pharmacies provide advice and information on abortion, contraception, vasectomies and STIs; provides a HIV Health Support Service; and participate in sexual health campaigns supported by materials from the Public Health Resource Department.

6.5 Targeted sexual health promotion and outreach

As outlined in the Sexual Health Promotion Strategy, there are various local populations with particular sexual health needs requiring targeted sexual health promotion. These include BME communities, Lesbian Gay Bisexual Transgender communities, Men who have sex with men (MSM), vulnerable adults, homeless people, people with learning difficulties and people with mental health problems.

6.6 Communications Strategy

For Croydon's Sexual Health Strategy to be effective, it needs to incorporate or be accompanied by a comprehensive communications strategy. This should cover all the key areas of the Sexual Health Strategy: delivering universal sexual health promotion to Croydon residents; priority areas such as HIV testing and repeat abortions; targeted communications addressing the particular needs of different groups, including vulnerable adult populations.

6.7 Strategic Objectives

- 6.7.1** Improve sexual health of all Croydon residents at all stages of the life course through the delivery of appropriate sexual health promotion initiatives and activities.
- 6.7.2** Increase integration of sexual health promotion in health and social services programmes
- 6.7.3** Deliver targeted sexual health promotion including outreach to high risk groups
- 6.7.4** Deliver targeted sexual health promotion to Croydon's vulnerable adult populations
- 6.7.5** Improve knowledge, information and access to local sexual health services through the development and implementation of Croydon's Sexual Health Communication Strategy

7 Workforce planning and development

Education, training and increasing workforce capacity are key in providing accessible, high quality sexual health services for the population of Croydon. The Strategy objectives are to implement a workforce development programme, provide training and education for all service providers through work-based or other education based programmes.

Education, training and personal development for all sexual health service providers is a key strategy for the Department of Health.⁴³ This would include people with a role in delivery of STI prevention, education and services, for example, social workers, youth workers, prison staff and teachers. It recommends that training needs to cover core skills and issues such as awareness, information and communication skills. Furthermore, it recognises that considerable expansion and modernisation of services is required with an integrated delivery of service.

The Public Health White Paper 'Choosing Health' (2004) identified training and workforce capacity issues as integral to the Sexual Health agenda.⁴⁴ It complements the Quality recommended Standards for sexual health training (2005) and provides excellent markers of good practice, designed to help improve the quality of services and the patient experience.⁴⁵ The standards include good training practice; and delivery of training including content, style and evaluation. Good quality sexual health training can help to counter health inequalities.⁴³

The role of the sexual health workforce has been expanding over the past few years with an aim to deliver these recommendations and high quality care for all service users in Croydon. Local contraception and sexual health services have developed multi-disciplinary teams to make effective use of skills of all team members. CASH is a busy training centre for sexual health care providers (e.g. GPs and pharmacists) for the qualification of all contraceptive methods. It is acknowledged that extra time is involved in the delivery of this training and the impact on the running of clinics where back fill is not available.

A workforce training needs assessment was undertaken to inform a local training plan. The aim was to facilitate staff from the community sexual health services to deliver basic services and integrate delivery of both reproductive and sexual health services in a variety of settings. This would increase the capacity and flexibility to better meet local sexual health needs.

There is a range of sexual health training available for practitioners and the general public at national and local levels. NHS South West London Croydon Borough Team offers courses to all local professionals covering a wide range of subject areas, e.g. Chlamydia screening and condom awareness. Specialist training programmes have also been developed for specific groups, for example community pharmacists that offer enhanced sexual health services.

⁴³ Better Prevention, Better Services, Better Sexual Health (2001). Department of Health.

⁴⁴ Choosing Health (2004). Department of Health

⁴⁵ Recommended Quality Standards for sexual health training (2005). Department of Health

7.1 Strategic Objectives

The overall Strategic Objectives are to:

- 7.1.1** Support all staff to develop their confidence, knowledge and skills through work-based and other dedicated education and training programmes, in line with national priorities
- 7.1.2** Provide access to flexible, multi-professional education and training to help develop interpersonal and communication skills; cultural competence, values and attitudes; and clinical and technical ability
- 7.1.3** Implement workforce development programme/capacity building to ensure competent and skilled staff to deliver to the integrated sexual health service and sexual health promotion agenda

8 Public Engagement and Patient Involvement

Community participation is important in helping deliver sexual health services effectively to Croydon population. The development of the strategy and programmes has been sought through existing user groups such as the Croydon University Hospital Patient Assembly and Croydon BME Forum. Successful public engagement and patient involvement would need to involve surveys, consultations, patient feedback and partnership working.

It is important to engage with current users of Croydon's sexual health services and the community to help deliver and develop services that fully meet the needs of the local population.

The Health and Social Care Act 2001 and the NHS Act 2006 places duty on NHS bodies to make arrangements for patient and public involvement and consultation on service planning and operation, as well as in proposals and decisions for changing the way those services are provided. This duty was reinforced in the 2006 publication "A Stronger Local Voice" from the Department of Health and included the establishment of Local Involvement Networks (LINKs) to replace Patient and Public Involvement Forums to support the drive for greater and more meaningful involvement. The Healthcare Commission Standards for Better Health: Annual Health Check requires all organisations to demonstrate that they engage with patients, carers and the public about the services they deliver.

The involvement of the local community in the development of the strategy and programmes has been increasingly sought through existing user groups in Croydon. Croydon University Hospital Patient Assembly, Croydon BME Forum, Faith Together in Croydon, Croydon LINKs, Croydon Voluntary Action, designated sexual health representatives and primary care patient groups have been involved in a variety of roles ranging from developing and implementing strategies to service implementation.

Members of the Croydon Sexual Health & HIV Partnership Board and existing user groups were consulted and involved in the service and strategy development for sexual health. A more robust programme is needed to ensure that all stakeholders are able to provide input at all stages in the development of services.

8.1 Strategic Objectives

- 8.1.1** Conduct an annual sexual health service survey through community groups and local services.
- 8.1.2** Perform a service user consultation (including a qualitative needs assessment) to identify preferred options and address issues around priority topics
- 8.1.3** Use information obtained from patient feedback to inform and improve local services
- 8.1.4** Continue to adopt a partnership approach and develop further links with other groups/agencies and other public sector organisations
- 8.1.5** Demonstrate successful engagement of patients and broader stakeholders in the development of hospital and community services.

9 Action Plan

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
Develop integrated sexual health service provision at levels 1 – 3 in the community	<ul style="list-style-type: none"> - Develop/agree patient care pathways, clinical governance arrangements - Pilot integrated sexual health service through CASH - Explore options for integrated sexual health service through CCSH 	<p>September 2011</p> <p>October 2011</p> <p>March 2012</p>	<p>Patient pathways, governance arrangements agreed.</p> <p>3,600 patients who receive integrated care through CASH</p> <p>Tariff agreed for integrated care through GUM</p>	<p>CASH)/GUM/ SWAGNET</p> <p>CASH</p> <p>SWL Acute Commissioner/ GUM</p>
Implement Workforce Development Programme/Capacity building to ensure competent and skilled staff to deliver to the integrated sexual health service and sexual health promotion agenda.	<ul style="list-style-type: none"> - Undertake workforce training needs assessment for CASH staff to deliver level 1 & 2 CCSH services. - Prepare and implement CASH training development plan. - Develop & Implement Sexual Health Workforce programme for clinical and non- clinical staff across SWL Sector - Ensure all healthcare providers and allied health professional (including midwives; health visitors, school nurses, practice nurses) are trained appropriately and provide up to date contraceptive and sexual health advice in line with local and national guidance e.g. STIFF and family planning 	<p>July 2011 and ongoing</p> <p>July 2011 and ongoing</p> <p>July 2012</p> <p>Annually</p>	<p>Training needs assessment undertaken for 100% of CASH staff</p> <p>CASH training plan implemented</p> <p>Sexual Health programme developed and promoted through SWAGNET</p> <p>Annual audit of number of trained practitioners for sexual health service with breakdown in type of training received</p>	<p>CASH</p> <p>CASH</p> <p>SWAGNET</p> <p>NHS SWL</p>

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
	training courses - Expand and increase the role of school nurses and health visitors in the delivery of Sex and Relationships Education (SRE)	Commence July 2011	As above	CUS/CHS
Reduce Health inequalities through targeted outreach HIV testing and Contraceptive services to identified high risk groups/areas.	- Opt-out Testing Pilot in Medical Admission at CUH - Develop pilot of HIV Testing for newly registered patients in four GP practices - Consider expanding opt-out testing in Emergency Department, specialist outpatients and increasing upper age limit to 80 years - Opt-out testing in antenatal services, abortion services, CASH, drug and alcohol services, sickle cell and tuberculosis services - Mapping exercises in high risk groups to develop HIV testing preferences and service infrastructure - Develop targeted HIV testing through THT	Started July 2011 December 2011 Investigate/feasibility study by March 2012 Scale up and establish by May 2012 Completed by December 2011 March 2013	1. 100% of attendees to be offered HIV test <ul style="list-style-type: none"> • Number offered testing over unit time • Number who accept testing over unit time 2. Reduce late diagnosis of HIV to 15% for 2011 <ul style="list-style-type: none"> • Number testing positive with CD4 count ≤ 350 over unit time 3. Monitor uptake of test offered <ul style="list-style-type: none"> • Number testing positive over unit time 4. Increase in early diagnosis of HIV, particularly in target groups by 2011 5. Enhance appropriate HIV testing services sites for target groups using findings from	CCSH CCSH NHS SWL/CCSH NHS SWL NHS SWL Public Health

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
	<ul style="list-style-type: none"> - Evaluate the impact of the 1)Outreach HIV testing; - 2) Young People’s domiciliary contraceptive service - Deliver targeted TP3 programmes to at-risk young people - Evaluate impact of targeted programmes to at-risk young people 	<p>Quarterly</p> <p>Quarterly</p> <p>April 2011-March 2012</p> <p>March 2012</p>	<p>mapping exercises Evaluation report produced.</p> <p>Evaluation Report produced</p> <p>500 Young People (TBC subject to SLA sign off).</p> <p>Evaluation report produced</p>	<p>THT</p> <p>Public Health/CASH</p> <p>CHS/CASH –TP Team</p> <p>Public Health/ CHS-TP team</p>
<p>Improve procurement arrangements to ensure efficiency, effectiveness and value for money through better performance arrangement focused on outcomes.</p>	<ul style="list-style-type: none"> - Undertake evaluation of the impact of the HIV support services for Croydon residents commissioned through the South London HIV Partnership. - Contribute to the review of the Pan London HIV Prevention Programme procurement arrangement. 	<p>November 2010</p> <p>March 2011 and ongoing</p>	<p>Report with recommendations for future commissioning options produced.</p> <p>Report produced and disseminated to Croydon Sexual Health & HIV Partnership Board.</p>	<p>Public Health</p> <p>Public Health</p>
<p>Increase access to contraception to reduce unplanned pregnancies and repeat abortions.</p>	<ul style="list-style-type: none"> - Condom distribution scheme (C-card) targeting young people 24 and under and other high risk groups. - Review & evaluate impact of condom distribution scheme, dedicated LARC clinics and outreach clinics for young people. 	<p>Annually</p> <p>Annually</p>	<p>Number of registered service users</p> <p>Evaluation report produced.</p>	<p>Public Health</p> <p>Public Health/CHS -CASH</p>

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
	<ul style="list-style-type: none"> - Deliver targeted Sexual health Drop-In clinics for young people Colleges and youth Services - Increase the number of pharmacies and pharmacists that provide enhanced sexual health services including oral contraception. - Develop guidelines for pharmacies, educational institutes and community contraceptive services on signposting to sexual health services - Increase uptake of contraception post procedure by abortion providers to 85% and ensure there is provision for immediate advice - Increase nurse-led sexual health service provision in GP practices and community settings - Increase uptake of LARC contraception - Develop PID and secure funding to provide additional domiciliary service capacity for women who have had a repeat 	<ul style="list-style-type: none"> April 2011 and ongoing Scale up for 2011/12 Establish and implement for 2012/13 Scale up for 2012/13 Scale up for 2012/13 Increase for 2012/13 Scale up for 2012/13 	<ul style="list-style-type: none"> 1443 youngpeople attended clinics 2011-12 <ul style="list-style-type: none"> ▪ No of additional pharmacies/pharmacists offering services; ▪ No of EHC offered (% increase on 2010-11) ▪ No of Chlamydia treatment (% increase from 2010-11); ▪ No of clients provided with oral contraception (baseline year) ▪ Percentage of women having an abortion who are offered screening for Chlamydia (incl uptake, diagnosed, treatment and partner treatment) ▪ Percentage offered screening for other STIs ▪ Numbers or percentage receiving advice and supply of regular contraception ▪ Type of contraception advised/offered and Uptake of the offer/advice ▪ Percentage of abortion methods ▪ Percentage of the proportion of LARC use 	<ul style="list-style-type: none"> CHS/CASH-TP Team Public Health Public Health Public Health/NHS Commissioned provider NHS SWL/Public Health/CHS CHS/CASH & SWL LARC Lead NHS SWL Commissioning Dept/Public Health

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
	<p>abortion aged above 25 years</p> <ul style="list-style-type: none"> - Provide access for an abortion assessment within five working days of initial contact with an abortion provider or other healthcare provider - Provide access for an abortion within two weeks, but within a maximum of three weeks, of initial contact with healthcare providers - Access to abortion services at under 10 weeks gestation - Consider improving the availability of the provision of contraceptive services and STI screening at nurse led school drop in sessions and nurse led clinics in general practice 	<p>Quarterly</p> <p>Quarterly</p> <p>Quarterly</p> <p>Explore and consider implementation for 2012/13</p>	<p>and number of repeat abortions</p> <ul style="list-style-type: none"> ▪ Percentage of uptake and type of contraception prior and after abortion ▪ New attendee data breakdown e.g. by age, requested service type and LARC uptake ▪ Percentage of women seen for assessment within five days of first contact with health provider ▪ Percentage having abortion procedure within the maximum three weeks ▪ Gestation at abortion ▪ Percentage of medical and surgical abortions in all gestation groups and under 10 weeks gestation ▪ Percentage of self-referral to abortion services ▪ Number of referrals to domiciliary outreach team ▪ Numbers or percentage referred to or directed to alternative services for contraception 	<p>CASH/CHS</p> <p>CASH/CHS</p> <p>CASH/CHS</p> <p>CASH-TP Team/CHS/Public Health</p>

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
Deliver Chlamydia Screening programme targeting sexually active young people age 15 – 24 years.	<ul style="list-style-type: none"> - Work with Pharmacists and GP's in the community to improve uptake of Chlamydia Screens 	Annually	<ul style="list-style-type: none"> ▪ % of sexually active young people age 15-24 opportunistically screened for Chlamydia 2010-11 	THT/ Public Health
	<ul style="list-style-type: none"> - Provide opportunities for increasing provider confidence in screening by developing and organizing delivery of update sessions for services 	Annually	<ul style="list-style-type: none"> ▪ Chlamydia diagnosis rates per 100,000 young adults aged 15-24 years 2011-12 	THT/ Public Health
	<ul style="list-style-type: none"> - Provide on site screening with colleges each term e.g. "Pee in the Pot" programme 	Annually		THT/ Public Health
	<ul style="list-style-type: none"> - Increase provision through the Integrated Youth Support Service 	Oct 2011		THT/ Public Health
	<ul style="list-style-type: none"> - Deliver opportunistic testing in a range of settings e.g. GPs, pharmacies, community sexual and reproductive health services, abortion services, CCSH clinics and outreach 	Annually		THT/ Public Health
	<ul style="list-style-type: none"> - Ensure 60% of all screens come from core services i.e. GPs, pharmacies, community sexual and reproductive health services and abortion services 	Annually		THT/ Public Health
	<ul style="list-style-type: none"> - Develop dual testing to include gonorrhoea testing 	To commence 2011/12		THT/ Public Health

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
Implement the DH “You’re Welcome” Quality Standards to improve patient experience.	<ul style="list-style-type: none"> - Increase the number of settings who have achieved ‘You’re Welcome Standards’ with initial priority placed on sexual health settings. 	March 2011 and ongoing	No/Type of settings who have achieved You’re welcome Standards	NHS SWL – Croydon Borough Team
Improve knowledge, information and access to local sexual health services through implementation of sexual health promotion	<ul style="list-style-type: none"> - Sexual Health Promotion Action Plan for Croydon - Maintain SH promotion activities e.g. events, drop-in sessions, clinics - Increase awareness, uptake and availability of C-Card Scheme for young people - Support the delivery of SRE and programmes in schools and colleges inline with best practice - HIV Lead African Communities 	<p>December 2012</p> <p>Develop and scale up in 2012/13</p> <p>No/Type of agencies on C-Card scheme</p> <p>Development of new Croydon Healthy Schools Programme in place. Healthy College Programme Strategy plan developed.</p> <p>Initiated and ongoing</p>	<p>Increased awareness of key SH messages Number of Croydon Council services delivering SH promotion</p> <p>Number of events at which SH promotion is taking place Annual % increase in uptake of sexual health drop-in’s Ongoing record keeping audits</p> <p>Increase from 2009-10 baseline Number of condoms distributed</p> <p>No/% of schools accredited. Reduction in number of U-18 conceptions in college settings</p> <p>Increase in uptake of HIV services by people from</p>	<p>Public Health/Corporate Communications</p> <p>Public Health</p> <p>Public Health</p> <p>Public Health/ Corporate Communications</p> <p>Public Health</p> <p>Public Health</p>

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
	worker in post.		African communities	
	– MSM health promotion activities	Initiated and ongoing	Increase in uptake of HIV services by MSM	Public Health
	– Outreach into colleges for sexual health advice and provision of contraception for young people	Nurse in post since Sept 2010	Numbers of people using service and mainstreaming into clinics where appropriate.	Public Health
	– Extend intensive SRE in small group settings by expanding delivery of 'TP3', utilising knowledge of teachers and other professionals to target those most at risk.	Minimum 500 young people who undertook TP3 training in 2011-12.	% reduction in local U-18 conception rate % reduction in TOP and repeat TOPs amongst young people aged under 19.	Public Health
	– Health needs assessment of Croydon's vulnerable adult populations	November 2010	HNA produced as part of JSNA	Public Health
	– Targeted communications to African communities	Annually	No of resources disseminated locally	Public Health
	– Develop targeted communications to high risk and vulnerable groups	December 2012	No of resources disseminated locally No of resources disseminated locally	Public Health
	– Develop two related TP Communication Campaigns per year in Croydon	Annually	No of resources disseminated locally No of campaigns delivered	TP Team/ Public Health
	– Work with colleagues across SWL to maintain updates and revisions	Maintenance and update of GIO	% increase in hits on GIO website	NHS SWL/ Public Health

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
	<p>to Getting it on (GIO) Website and develop associated media and resources as funding allows.</p> <ul style="list-style-type: none"> - Facilitate development and updating of local young people's sexual health and teenage pregnancy resources - Deliver sexual health based information seminars for local managers and frontline practitioners. - Maintain on-going development and delivery of sexual health related training courses as part of NHS Croydon Public Health Training Programme 	<p>website achieved-annually</p> <p>Annually</p> <p>Annually</p> <p>Annually</p>	<p>% increase in uptake of local sexual health services</p> <p>No/Type of practitioners attending seminar % increase on numbers trained from 2010-11</p> <p>No/Type of TP and SRE training courses delivered</p>	<p>TP-Team/ Public Health</p> <p>NHS SWL/ Public Health</p> <p>Public Health/TP-Team/THT</p>
<p>Review the Sexual Health and HIV Partnership Board and supporting Task Groups to facilitate partnership working.</p>	<ul style="list-style-type: none"> - Revised terms of reference developed - Work plan developed for the Sexual Health & HIV Partnership Board and Task Groups - Sexual Health & HIV partnership board and task group meetings implemented - Perform a service user consultation (including a 	<p>Annually</p> <p>Annually</p> <p>April 2010 and ongoing quarterly</p> <p>Annually</p>	<p>Work plan for Sexual Health Partnership Board & Task groups</p> <p>Minutes/progress reports/ Annual sexual health & HIV report</p> <p>Report developed and disseminated.</p> <p>Written report</p>	<p>Public Health</p> <p>Public Health</p> <p>Public Health</p> <p>Public Health</p>

STRATEGIC OBJECTIVES	ACTIONS	TIMESCALE	PERFORMANCE INDICATOR	RESPONSIBLE LEAD
	qualitative needs assessment) for priority issues e.g. repeat abortion			

Appendix A- Croydon Contraception and Sexual Health⁴⁶ Services offered

Level 1

- Sexual history taking, risk assessment and signposting
- HIV testing (including pre test discussion and giving of results)
- Pregnancy testing and counselling
- Referral for abortion
- Provision of emergency hormonal contraception
- Contraceptive information
- Health promotion
- Condom distribution
- Range of hormonal contraception / Depo-Provera
- Cervical screening and referral
- Chlamydia screening as part of the NCSP

Level 2

- IUD insertion and removal (including emergency IUD fitting)
- IUS insertion and removal for contraception and gynaecological reasons
- Contraceptive Implant insertion and removal

Level 3

- Specialist level responsibility for provider quality, teaching and training and clinical governance
- Contraceptive outreach provided: Weekly '4 All' sexual health information and advice sessions plus condom distribution at 2 sites in collaboration with a voluntary sector provider via Teenage Pregnancy funding; Weekly '4 Lads' sexual health information and advice sessions plus condom distribution with a voluntary sector provider via Teenage Pregnancy funding.
- 3 dedicated Young Persons clinics weekly
- Highly specialised contraception
- Difficult IUD insertion and removal
- Difficult implant removal
- Psychosexual / erectile dysfunction services

The service also provides teaching on natural family planning, a domiciliary service and has a care pathway in place with the local CCSH service for HIV positive women requiring contraception.

⁴⁶ London sexual health service mapping-Results & analysis, London Sexual Health Programme.
[http://www.medfash.org.uk/publications/documents/London_sexual_health_service_mapping_report_PU
BL_ONLINE.pdf](http://www.medfash.org.uk/publications/documents/London_sexual_health_service_mapping_report_PU_BL_ONLINE.pdf)

Appendix B- London Sexual Health Strategic Framework- Standards⁴⁷

Five overarching standards have been identified as the basis for commissioning improved sexual health and sexual health services in London to deliver the vision.

Standard One

PCTs should commission a comprehensive range of Sexual Health services that deliver improved health and wellbeing outcomes and measures meeting individual needs and showing service quality and effectiveness.

Standard Two

Sexual health services involve users in their design and delivery and regularly measure the experiences of service users.

Standard Three

Commissioners and providers work together to identify innovative approaches to promotion, prevention, and care that will increase and improve health and wellbeing outcomes.

Standard Four

Commissioners within each of the London sectors will work collaboratively and develop and fund Networks within a consistent London Framework, agreeing standards for quality and productivity across the sector.

Standard Five

Sexual health providers will develop integrated services across primary, community and secondary care using London Sexual Health tariffs to enable equity of access to integrated Sexual Health services. This will be under a Clinical Director providing leadership to the network of service providers, and with particular responsibility for clinical governance and training.

⁴⁷ London Sexual Health Strategic Framework 2009, London Sexual Health Programme
<http://www.londonsexualhealth.org/documents-resources.html>

Appendix C- Croydon Sexual Health Services – Service mapping 2009/2010

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
GENERAL SEXUAL HEALTH & HIV SERVICES						
1	CCSH	Croydon residents and residents from other boroughs	Advice, info, testing and treatment for all STIs, sexual health advice and info, partner notification, emergency contraception, condom supply	CUH	London Road, Croydon, CR7 7YE	NHS SWL -Croydon Borough Team
2	CCSH	Croydon residents seen outside of borough	CCSH services (variable)	Other GUM (Sexual Health) Clinics Across London	Various locations	NHS SWL -Croydon Borough Team
3	Sexual Health service provision through GP's	Croydon residents	Condom supply, contraceptive advice and prescribing – 64 GP Practices, Provision of IUD/IUS and implant fitting - 55 GPs on NES	GPs	Various Locations in Croydon	NHS SWL -Croydon Borough Team
5	GP Led Health Centre (Walk In Centre)	Open to all Croydon residents. Those not registered with GP - homeless, asylum seekers, younger people	Chlamydia testing, Oral contraception, EHC , referral to CCSH service.	GP	Impact House, Edridge Road, Croydon, CR9 1PJ	NHS SWL -Croydon Borough Team
6	Contraceptive and Sexual Health	Croydon residents and residents from	Walk In Service except for services where appointments are required. Emergency	CCHS	Impact House, Edridge Road,	NHS SWL -Croydon Borough Team

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
	Service (CASH)	other boroughs	<p>contraception, supply of condoms, contraceptive advice, specialist clinics (IUD fitting, implant – Walk In Service; HIV testing/counselling by appointment, psychosexual clinic by appointment, natural family planning), pregnancy testing and referral, Chlamydia screening and treatment.</p> <p>Clinic M-S, includes domiciliary service, LARC clinics 3/wk, psychosexual, outreach to Parkway and Connections - 1 clinic/wk ea.</p>		Croydon, CR9 1PJ	
7	Contraceptive and Sexual Health Service (CASH) Spoke of main CASH Service	Croydon residents and residents from boroughs	New Addington hub of familyplanning, contraception, condoms, SH advice. Appointment only.	Croydon Community Health Servicen - CASH	Parkway New Addington, CR0 0JA	NHS SWL -Croydon Borough Team
8	Positive Parenting and Children HIV Support Service	Parents, partners, young people infected and affected by HIV	Support and health promotion	Positive Parenting and Children (PPC)	Positive Partners / Positively Children Unit 64 and 66 Eurolink Business Centre	Joint Commissioning - South West London PCTs & Local Authorities

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
					49 Effra Road London SW2 IBZ	
9	Mildmay Respite Services	People living with HIV in SW London	Respite and rehabilitation for brain impairment following HIV	Mildmay UK	Mildmay, Mission Hospital, Austin Street, London, E2 7NB	Joint Commissioning - SWL PCTs & Local Authorities
10	HIV Health Support	People living with HIV in South London	Health trainer/ Health promotion, with treatment and information publications	THT	Outreach in various locations	South London HIV Partnership (South London PCTs and South London Local Authorities)
11	HIV Counselling Service	People living with HIV in South London	1:1 counselling session for individual clients	THT	Outreach in various locations	South London HIV Partnership (South London PCTs and South London Local Authorities)
12	HIV Advocacy & Support Service	People living with HIV in South London	Advise and advocacy on housing, immigration, debt and legal issues	THT	Outreach in various locations	South London HIV Partnership (South London PCTs and South London Local Authorities)
13	HIV Peer Support Services	People living with HIV in South London	Emotional and peer support weekly groups.	THT	Outreach in various locations	South London HIV Partnership (South London PCTs and

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
						South London Local Authorities)
14	HIV Service Co-ordination	People newly diagnosed with HIV and people diagnosed with HIV already accessing services	Sign posting service for people living with HIV. First point of contact to all South London HIV Partnership services.	Metro Centre	Outreach in various locations	South London HIV Partnership (South London PCTs and South London Local Authorities)
15	Data Network Management for SLHP Services	People living with HIV in South London	Collection of all service user data for South London HIV Partnership	Meganexus	Based on the Euston Road.	South London HIV Partnership (South London PCTs and South London Local Authorities)
16	Monitoring Verification and Evaluation (MVE)	People living with HIV in South London	Monitoring and evaluation of SLHP services, producing user feedback and audits	NAW Solutions	Outreach in various locations	South London HIV Partnership (South London PCTs and South London Local Authorities)
17	HIV Social Care Support Service	Adults, children and young people infected or affected by HIV	Social care related support, care packages.	Croydon Council		Croydon Council
18	HIV Support	Adults, children and young people	Advocacy, training, counselling, mentoring, social	The Junction		Croydon Council

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
	Service	infected or affected by HIV	events, general support, health promotion.			
YOUNG PEOPLE (<25's)						
19	LARC Clinics - Contraceptive and Sexual Health Service (CASH)	Young people under 25 years.	Provision of LARC methods of contraception (IUD; Implant; Injectables;) and other methods of contraception (Oral contraception, EHC; Condoms) Chlamydia Screening, counselling, information, advise and signposting.	Croydon Community Health Service - CASH	Impact House, Edridge Road, Croydon, CR9 1PJ	NHS SWL –Croydon Borough Team
22	C-Card Condom Distribution Scheme	Condom distribution to under 25's	Condom distribution through community outlets targeting young people under 25 and identified high risk groups.	NHS SWL - Croydon Borough Team - Public Health	Various community locations	
23	Sexual Health service provision through community pharmacies	Young people aged under 21	Enhanced Service: Condom provision via C-Card Scheme, emergency hormonal contraception, Chlamydia screening and treatment, partner notification, oral contraception, pregnancy testing; sexual health advice and signposting	9 Community Pharmacies offering enhanced services	Various Locations in Croydon	NHS SWL –Croydon Borough Team

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
			Standard Pharmacy: Chlamydia screening, sexual health advise and signposting			
24	Sexual health outreach– FE colleges	Mostly 14-19year olds. A-level and vocational	sexual health clinics, DASH campaigns, targeted and universal SRE provision	CCHS – Teenage Pregnancy Team	3 sites (3 colleges),2 session each site.	NHS SWL –Croydon Borough Team
25	Sexual health outreach – Youth Centres	Young people accessing youth service provision (usually <19 years)	Pregnancy test, Chlamydia screening, condoms, contraception, advice, EHC, TOP referral	CCHS – Teenage Pregnancy Team/ Integrated Youth Support Service	Waddon Youth Centre	NHS SWL –Croydon Borough Team
26	Sexual Health Outreach – Turnaround Centre	13-19 year old young people (upto 25 years of age if LDD young person)	SH Clinic	CCHS – Teenage Pregnancy Team	Turnaround Centre	NHS SWL –Croydon Borough Team
27	Talk Bus -General young peoples health advice –inc. sexual health	Sexual Health outreach, targets Young People in New addington and Fieldway and Selhurst	General health promotion outreach services covering Drugs, Sexual health and other health issues relevant to young people.	Croydon Drop In	Various locations in Croydon	Healthy Croydon Partnership – commissioning overseen by NHS SWL –Croydon Borough Team
28	Sexual Health Outreach – Targeted Groups of	Those identified at greater risk of poor sexual health or	TP3 programmes and additional SRE provision	CCHS – Teenage Pregnancy	Based on local needs assessment, high rate	NHS SWL –Croydon Borough Team

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
	Young people	unintended teenage conception e.g. LAC, YP from particular wards/schools, young offenders, those excluded from school			wards/schools/groups of young people	
MEN WHO HAVE SEX WITH MEN (MSM)						
29	Health Promotion - Communication Campaign	Men who have sex with men	HIV prevention media targeting gay men, Dedicated website, information and signposting, sexual health magazine.	Gay Men Fighting AIDS		
30	Health Promotion – Group work	Men who have sex with men	HIV prevention group work targeting gay men	THT	Outreach in various locations	
31	Health Promotion – Group work	Men who have sex with men	HIV prevention group work targeting gay men	PACE	34, Hartham Road, London N7 9JL	
32	Counselling and mentoring	Men who have sex with men	HIV prevention counselling and mentoring programme targeting gay men.	GMI Partnership		
33	Health promotion - Health Trainers Initiative	Men who have sex with men	HIV prevention outreach programme targeting gay men.	GMI Partnership	Outreach in various locations.	

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
34	Condom Distribution	Men who have sex with men	HIV prevention condom distribution programme targeting gay men.	Camden PCT	Distribution outlets in various locations.	
35	Communications – Mass Media	Men who have sex with men	HIV prevention media targeting gay men	THT		
36	Telephone Helpline	Lesbian & Gay service users	HIV prevention media targeting gay men	Lesbian & Gay Switchboard		
37	Health promotion - Health Trainers Initiative	Men who have sex with men	Health Trainer/ Health Promotion	THT	Outreach – Delivered through various locations	Joint Commissioning - SWL PCTs & Local Authorities
38	North London Health Support Service		HIV Prevention work	THT		
39	Communications - Information Publications	Gay men, Black Africans	Treatment and health information publications	THT		Pan London HIV Prevention Programme
BME & AFRICAN COMMUNITIES						
40	Communications – African Communities (Mass and Small Media)	Black Africans; African Community/faith organisations	HIV Prevention work - media campaigns targeting Black Africans.	THT		Pan London HIV Prevention Programme

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
41	African Health Promotion Skills	Black Africans, African Caribbean, Asian and people of African extraction infected or affected by HIV.	Emotional Support / Health Promotion	SHAKA	38-40 Kennington Park Road, London, SE11 4RS	Joint Commissioning - SWL PCTs & Local Authorities
42	Community Outreach condom distribution	Black Africans in SWL, Lambeth, Southwark and Lewisham	Health promotion outreach and condom distribution targeting Black African communities.	African Cultural Promotion (ACP)	Outreach in various locations	Joint Commissioning - SWL PCTs & Local Authorities
SEXUAL HEALTH & HIV TRAINING & CAPACITY BUILDING -COMMUNITY GROUPS						
43	Organisational Development – Capacity Building	African Community Organisations	HIV prevention capacity building work with African community and faith organisations to enable them delivery HIV prevention work with their client groups.	THT		Pan London HIV Prevention Programme
CLINICIANS & COMMISSIONERS						
44	SWAGNET - Clinical Network programme across SWL	Clinicians, commissioners	HIV and GU Clinical Network Activity across South West London	SWAGNET - Hosted by Wandsworth PCT		SWL PCTs
RAPE & SEXUAL ASSAULT						

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
45	Rape and Sexual Abuse Support Centre (RASAC) - Croydon	Women and girls over 14 years who are victims of sexual violence	Helpline, advocacy and counselling, long term (up to 18 months) psychological support to victims of rape and sexual assault.	Rape & Sexual Abuse Support Centre	Croydon CR9 2AW	London Councils, Croydon Council, GLA, Safer London, City Bridge Trust, NATWEST & other charitable organisations
46	The Haven- Rape and Sexual Assault Service	General population - all age group	Medical forensic, practical and emotional support and counselling services.	The Haven	Ground floor, The Caldecot Centre, 15-22 Caldecot Road, London SE5	Pan London – Joint Commissioning between NHS London PCTs and Metropolitan Police Service
MATERNITY SERVICES						
47	Mayday Midwifery Services	Females of all Age groups. Dedicated Service also available for under 16's.	Ante-natal support, STI testing & CCSH referrals	CUH	London Road, Croydon, CR7 7YE	NHS SWL -Croydon Borough Team
TERMINATION OF PREGNANCY SERVICES						
48	Marie Stopes International - Termination of Pregnancy Services	General female population	TOP service and support, contraceptive advice, vasectomies Chlamydia screening, STI screening and treatment	Marie Stopes International	1a Raleigh Gardens Brixton Hill London SW2 1AB	NHS SWL -Croydon Borough Team

	SERVICE NAME	AUDIENCE REACHED	OUTLINE OF SERVICE PROVIDED	PROVIDER	LOCATION	COMMISSIONING ARRANGEMENT
			Must be registered with Croydon GP, appointment only			
49	CUH – Termination of Pregnancy Services	Patients requiring complex care of all ages	Complex termination of pregnancies, Vasectomy, Female sterilisation	CUH	London Road, Croydon, CR7 7YE	NHS SWL -Croydon Borough Team
REFUGEE & HOMELESS						
50	Refugee health team	New entrants, asylum seekers, refugees, unaccompanied minors	General health services including provision of contraception, Chlamydia Screening, EHC, Condoms and sexual health advise.	CCHS		NHS SWL -Croydon Borough Team
51	Homeless Health Team	Homeless in Croydon	General health services including provision of sexual health services as required.	CCHS		NHS SWL -Croydon Borough Team

Appendix D- List of Abbreviations

Abbreviation	Full name
AIDS	Acquired Immune Deficiency Syndrome
BME	Black and Minority Ethnic
CASH	Contraception and Sexual Health Services
CCHS	Croydon Community Health Services
CCSH	Croydon Centre for Sexual Health
CHS	Croydon Health Services
CUH	Croydon University Hospital
EHC	Emergency Hormonal Contraception
GP	General Practitioner
GUM	Genito-Urinary Medicine
HIV	Human Immunodeficiency Virus
HNA	Health Needs Assessment
IUD	Intrauterine Device
IUS	Intrauterine System
JSNA	Joint Strategic Needs Assessment
LARC	Long Acting Reversible Contraception
LINKs	Local Involvement Networks
MSM	Men who have sex with men
NCSP	National Chlamydia Screening Programme
NHS	National Health Service
NHS SWL	National Health Service South West London
PCT	Primary Care Trust
PID	Project Initiation Document
PSHE	Personal, Social and Health Education
SH	Sexual Health
SLA	Service Level Agreement
SRE	Sex and Relationship Education
STI	Sexually Transmitted Infection
SWAGNET	South West London GUM & HIV Clinical Service Network
THT	Terrence Higgins Trust
TP	Teenage Pregnancy
VSI	Vital Signs Indicator
WHO	World Health Organisation