

Tracy Kirk is the Teenage Pregnancy Services Manager for Stoke-on-Trent City Council.
For communication please email: tracy.kirk@stoke.gov.uk

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Teenage Pregnancy Services: The 'Stoke Model' of early identification and intervention

The Stoke Teenage Pregnancy Services developed the 'Stoke Model' of early identification (and intervention) that shows the success of early identification of young people who are at risk of a range of negative outcomes. Identification is only the first part of a process - services need to work together at a local level to make sure there is appropriate support ready to work with that young person.

This article highlights how young people's risk factors are inter-linked and the benefits of joint working for all agencies. The 'Stoke Model' has been identified as Gold Standard evidence based practice by the Department of Health/National Support Team. Using this model, the Stoke conception rate (2008) is best since the baseline (1998) with a 14.3% reduction between 2007 and 2008 compared to 3.2% nationally.

Background

Our Teenage Pregnancy Strategy was revised in 2007. At that time we identified a significant gap in terms of working with at risk and vulnerable young people. Preventative work was seen as a key part of the new strategy. Our under-18 conception rate at the time was particularly high and had remained static for many years.

We gathered evidence from a number of sources including: national research relating to teenage pregnancy and early intervention; focus groups with young

people and professionals; and multi-agency meetings of professionals. In order to identify young people at risk we developed a screening toolkit, including guidance for professionals. This mirrors the sections of the Common Assessment Framework (CAF) documentation - built into local CAF guidance and procedures. Amongst other themes it covers health, learning, background, family history, substance misuse. A lot of the risk factors are generic enabling us to identify young people who are vulnerable and in need of a wide range of support - they may be at risk of pregnancy, being without education, training or employment, involved in crime etc.

In order to support young people at risk, we set up a dedicated Teenage Pregnancy Prevention Team in September 2007.

Appropriateness

The early identification model allows us to swiftly identify young people at risk of pregnancy, or who are vulnerable and in need of support. The toolkit and associated training, (mandatory for all front line staff and managers across children's services and Connexions), is now widely accepted and used across all five neighbourhood areas by many young people and professionals. We have supported many other local authorities to develop a similar model.

Local conception data is used to provide more timely information regarding 'hotspot'

areas, (mapped against hotspot areas for young people not in education, young people involved in crime etc, in order to give us a more complete picture of areas of need across the city).

We have consulted with young people and professionals and have trained young people, foster carers, social workers, training providers, schools and many more. We have also engaged with parents through our parents' engagement partnership.

The model complements other key elements of the revised Teenage Pregnancy strategy. For example: a new area based delivery model for contraception and sexual health services, (under 25s Walk-in clinics); the introduction of our multi-agency centres (MACs Places) offering drop-ins from a range of different agencies including the Teenage Advice Service, Connexions, Youth Service, mental health services, police, substance misuse services, Quit Smoking service, Clinic In a Box, Young People's Panel (peer support); and many more. The sessions are instant access thus reducing the waiting times in mainstream service delivery. The strategy has improved the systems to gather information about young people leading to more co-ordinated packages of support.

There are currently 21 MACs sites (including special schools and PRUs, a faith school, and four primary schools, local college).

Additional benefits

- ~ Joint planning and delivery across services.
- ~ Common data collection sheets.
- ~ Improved integrated working practices.
- ~ Instant access drop-ins (reduced waiting times in mainstream delivery).

Prevention Officers' Role

- ~ Provide training in identifying risk. (More than 600 professionals have been

trained).

- ~ 1:1 support to young people identified as high risk. This intervention will involve support in all areas identified as part of the screening process.
- ~ Lead professional, where appropriate and ensure that young people are provided with a coordinated multi agency action plan. This support covers a range of areas from contraception/sexual health, support with education, substance misuse, self esteem/aspirations, careers and many more.
- ~ Group sessions - as above but more suited to group delivery (medium-low risk).
- ~ Drop-in service as part of MACs.
- ~ Service widely accepted across the city - all key agencies trained to identify risk and make appropriate referrals.
- ~ Dedicated resources developed to use with young people with learning difficulties or disabilities.
- ~ Team will visit young people in a venue/setting of their choice.

Impact

- ~ Evaluation of MACs Place (March 2010) gained the views of many young people. There was much evidence that MACs are providing the support and guidance that many young people require across the city, and that the majority of pupils who have sought help have found the service useful.
- ~ Young people have a significant say in service design and delivery.
- ~ Prevention team have worked with over 400 young people identified as high risk, more than 500 in group settings, and more than 8500 in drop-ins.
- ~ Steady reduction in the rolling average under 18 conception rate from Q4 2007, to Q3 2009 - timeline for the

establishment of the prevention team correlates directly with the quarterly reductions.

- ~ Conception rate (2008) - best since the baseline (1998) (14.3% reduction between 2007 and 2008 compared to 3.2% nationally).
- ~ Overall reduction of 10.6% (from baseline) in less than 3 years.
- ~ Recommendations from the MACs evaluation have now been addressed.
- ~ Better results in supporting young people into education/training, and for reducing first time entrants to the criminal justice system. These areas are also considered due to the close working practices now evident across different agendas.
- ~ Model identified as evidence based best practice (DH/ DfE) and is due to be disseminated across the country (also featured in *Teenage Pregnancy; Beyond 2010*, and the *Families and Relationships Green Paper*, and to support the *NHS White Paper The NHS White Paper, Equity and Excellence*:

Liberating the NHS, presented to ministers/lead members.

~ Teenage Pregnancy is now seen as 'everybody's business'.

Sharon Menghini, Stoke-on-Trent City Council Director Children and Young People's Services, said: "The strategy we have put in place to tackle teenage pregnancy has helped thousands of young people in the city. We recognise that teenage pregnancy cannot be viewed in isolation, and there are other issues which affect young people who are vulnerable and in need of a wide range of support."

"These young people may be without education, training or employment, or be involved in crime. We are committed to helping these young people, and have provided training to staff across the city to give young people support from an early age. While teenage pregnancies statistically remain quite high in the city, compared to other areas of the country, the work that we are doing to address the issue is driving down figures in the city faster than the national average, and I'd like to thank all staff for their hard work."

Young People Lifestyle Surveys

CHANGING BEHAVIOUR WITH SHEU

The Schools Health Education Unit (SHEU) have been supporting education and health professionals since 1977 and are happy to survey large authorities or small clusters of schools. Our aim is to support the needs of local communities and are now very experienced in combining our paper data with online data where schools are given the choice of the medium that works best for them.

Our young people surveys cover a range of issues including: Bullying, Self-esteem, Inequality, Alcohol, Sexual health and Healthy Eating. The resulting baseline data are used to inform planning, monitoring and improving health and education programmes.

How do you know when you've made a difference? Schools taking part in SHEU surveys have been offered, as standard, a report which compares their figures from this year with a previous survey. We have recently enhanced these reports with a simple summary and a statistical analysis showing which differences (if any) are significant. Please contact Angela for a quote - you may be surprised by the low cost for the service we deliver to the authority and to individual schools.

Angela Balding Tel: 01392 66 72 72 Email: angela.balding@sheu.org.uk