Teenage Conception Intervention and Audit
The ‘Empower to Choose’ project

The ‘empower to choose project’ is an intervention to reduce repeat teenage conceptions by encouraging the uptake of long acting reversible contraception (LARC)

1 Rationale

Young women who conceive as teenagers are at greatly elevated risk of further repeat teenage conceptions. Therefore, an intervention to reduce repeat teenage conceptions by encouraging the uptake of long acting reversible contraception (LARC) has the potential to have a meaningful impact upon teenage conception rates.

Assuming that the rate of repeat teenage conceptions in Wales is 20%, an intervention that achieved a sustained 50% reduction in repeats would reduce the overall teenage conception rate by 10%.

Pregnant teenagers accessing health services (midwifery, termination of pregnancy services, early pregnancy assessment units and sexual health services) are the most easily identified subgroup of teenagers at risk of further teenage conceptions within Wales. Therefore, an intervention which targets this group is likely to achieve relatively high coverage of an at risk population and be the most cost effective approach.

This group will be targeted by the all Wales ‘Empower to Choose’ project. This project is phase one of a larger body of work planned for the near future.

Identification and engagement with individuals who are defined as belonging to other high risk groups (e.g. Looked After Children (LAC) / care leavers) will be targeted in phase two.

The broader population of vulnerable individuals defined, more loosely, by socio-demographic indicators will be targeted in phase three.

2 Overview of the project ‘Empower to Choose’

The project will be an all Wales targeted intervention aimed at pregnant young women who conceived before their eighteenth birthday. The intervention will be delivered through:

- maternity services prior to childbirth or at childbirth
- termination of pregnancy services
- early pregnancy assessment units
- sexual health services
- specialist young person services (e.g. LAC nurse, drug treatment young person service)

12 Teenage Conception Lead Contact details

If you have any questions regarding this work please contact your Teenage Conception Lead in your Health Board

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<thead>
<tr>
<th>Health Board</th>
<th>Contact details</th>
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<tbody>
<tr>
<td>Abertawe Bro Morgannwg University Health Board</td>
<td>GUM Dept. Singleton Hospital Sketty Lane Swansea SA2 8QA Tel: 01792 285005</td>
</tr>
<tr>
<td>Aneurin Bevan Health Board</td>
<td>Sexual and Reproductive Health, Llanfrechfa Grange Hospital, Cwmbran, NP44 8YN Tel: 01633 623734</td>
</tr>
<tr>
<td>Cwm Taf Health Board</td>
<td>Obstetrics Gynaecology and Sexual Health, Prince Charles Hospital, Merthyr Tydfil, CF47 9DT Tel: 01685 721721 ext 8944</td>
</tr>
<tr>
<td>Cardiff &amp; Vale University Health Board</td>
<td>Integrated Sexual Health, Cardiff Royal Infirmary, Newport Road, CF24 0SZ Tel: 029 2033 5208</td>
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<tr>
<td>Hywel Dda Health Board</td>
<td>Sexual Health Service, Pond Street Clinic, Pond Street Carmarthen, SA31 1RT Tel: 01267 227475 / 227603</td>
</tr>
<tr>
<td>Powys Teaching Health Board</td>
<td>Midwifery and Sexual Health, The Merlins, Llandrindod Wells Hospital, Powys, LD1 5HF Tel: 01597 828755</td>
</tr>
<tr>
<td>Betsi Cadwaladr University Health Board</td>
<td>Sexual Health Service, Royal Alexandra Hospital, Marine Drive, Rhyl, LL18 3AS Tel: 01745 443025</td>
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Contraindications for Cerazette®

Concurrent use of liver enzyme inducing drugs.

Liver enzyme inducers: Most anti retroviral drugs, antiepileptic drugs (not lamotrigine or sodium valproate (Epilim®), treatment for tuberculosis (rifampicin, rifubatin), St John’s wort).

If on liver enzyme inducers DMPA (Depot Provera®) can still be given safely and should be used.

DMPA is the preferred method of bridging contraception

If Cerazette® is chosen issue 3 months (1 box) supply and arrange for Sexual Health F/U ASAP but within 4 weeks. Advise to start on day following EVAC or day following Misoprostol application.

- Cerazette® needs to be taken roughly the same time every single day,
- Choose time of day that suits lifestyle and set mobile alarm
- If pill missed can be taken up to 12 hrs after scheduled time, take next pill when scheduled.
- If more than 12hrs late or diarrhoea or vomiting risk of pregnancy for 48 hrs after last missed pill.
- No break to be taken at the end of the pack, run packs straight into each other
- Issue leaflet with supply
- Both methods can cause irregular bleeding patterns and monthly bleeding may increase or cease altogether.
- Either method to be used in conjunction with condoms.

10 Important contacts

For advice regarding LARC provision ‘in hours’ contact the sexual health service using the contact details outlined in point 12 below.

For advice on LARC provision out of hours an ‘on call’ service has been devised and can be contacted on Telephone 029 20402464.

This service will be staffed by a rota of suitably experienced consultants in sexual health.

The contact phone number of the consultant on call at that time will be given in the answer message.

11 Obtaining further copies of project forms

Further copies of the Teenage Conception Audit Form can be obtained from:

Sexual Health Lead, Public Health Wales, Health Protection, Temple of Peace, Cathay’s Park, Cardiff, CF10 3NW

The project aim is to reduce the incidence of repeat conceptions amongst teenagers who have already conceived at least once before their eighteenth birthday.

3 What is the intervention?

The intervention is a combination of:

1. Increased education and awareness raising on the benefits of LARC to young women who present to services having conceived before their eighteenth birthday. Thus all relevant health care workers across the services listed above should be informed and confident to either provide LARC appropriate to the needs of the young person or refer on to the appropriate service for LARC provision whilst offering interim bridging contraception.

2. A robust mechanism of referral for young women and the capturing of patient specific information that both supports individual patient care and allows audit of the uptake of LARC amongst this vulnerable group of young people.

4 Why are we using a teenage conception audit form?

Services will be provided with health board specific teenage conception forms to complete for all teenagers who present pregnant before their eighteenth birthday. The purpose of the teenage conception form is to:

(a) Support service providers in the provision of the LARC intervention; to ensure effective referral of young women to, and follow up by, appropriate services

(b) Allow evaluation of the pattern of LARC uptake amongst the target group and of further repeat teenage pregnancies

Responsibility for completing the form lies with the clinician providing care at the end of the pregnancy. All data will be collected and handled in a strictly confidential manner in line with data governance requirements. The data will not be passed on to primary care, parents, teachers or other services caring for the young person.

Service providers will be given addressed return envelopes to support efficient reporting of data to local teenage conception leads who will then, in turn, forward appropriate data to Public Health Wales.
5 The Teenage Conception Audit form

The form consists of a booklet of 7 pages as follows and is printed in a way that allows information written on the top sheet to be replicated to further copies below:

- On the left hand side of the booklet page 2 (yellow) is a duplicate of page 1 (blue). However, if using an addressograph sticker for patient details instead of writing them, it will be necessary to put an addressograph sticker from the patient notes on both page 1 and on page 2.

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Has this teenager just had a pregnancy that has ended in 1st or 2nd trimester, either through miscarriage or termination?

Has this teenager delivered within the last 21 days?

Has this teenager just had a pregnancy that has ended in 1st or 2nd trimester, either through miscarriage or termination?

Yes

No

Yes

No

Teenager expresses preference for sub-dermal implant: 

Fit immediately and arrange follow up in 4-8 weeks OR

Initiate bridging contraception and refer to sexual health service for follow up ASAP but within 4 weeks

Teenager expresses preference for intrauterine device:

- If surgically managed to be fitted at time of EVAC
- If medically managed initiate bridging contraception – either 150mg Depo-Provera® im or 3 month supply of Cerazette®

Arrange for sexual health service follow up in 4 weeks in both cases

Contact sexual health service or trained staff for further advice before discharge. Alternatively, arrange for follow up with the sexual health service within 2-3 weeks

*Teenagers express preference for intrauterine device:

Fit immediately and arrange follow up in 4-8 weeks

OR

Initiate bridging contraception and refer to sexual health service for follow up ASAP but within 4 weeks

Encourage LARC and issue bridging contraception and condoms as a minimum

Bridging contraception to be tailored to the teenagers needs.

Where contraceptive trained staff member is not available we suggest the following:

Use 150mg of DMPA (Depot Provera®) im or Cerazette® in conjunction with condoms.

Bridging contraception: use 150mg of DMPA (Depot Provera®) im or Cerazette®

Where contraceptive trained staff member is available a more tailored approach should be taken.
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* liver enzyme inducers: most antiretroviral drugs, antiepileptic drugs (not including lamotrigine or sodium valproate (Epilim®), treatment for TB (rifampicin, rifabutin), St John’s Wort

* If on liver enzyme inducers DMPA (Depo-Provera®) can still be given safely but Cerazette® is contraindicated
Instructions for teenage conceptions lead

You will receive the form, minus the blue pages, for each young person seen across the maternity, termination of pregnancy, sexual health and obstetrics and gynaecology services.

Please complete the Teenage Conception Lead Form.

When complete:

The white pages of the form should be detached and sent in the pre-paid addressed envelope provided to: Sexual Health Lead, Public Health Wales, Health Protection, Temple of Peace, Cathay’s Park, Cardiff, CF10 3NW.

The rest of the form should be retained by the teenage conception lead.

The ongoing care for this patient is then as it would be for any other patient who has accessed your service for contraceptive care.

Dissemination of results

Public Health Wales will produce a yearly report of activity derived from this audit, which will be available on the Public Health Wales website; shared with Welsh Government and sent to service leads involved in the project across Wales. Any information put in the public domain will be anonymised and will be presented in a manner that does not allow deductive disclosure.

Guidance

Guidance is outlined in the following section.

For further information visit: www.publichealthwales.org/empowertochoose
On the right hand side page 7 (yellow) is a duplicate of page 6 (white) which is to be completed by the Teenage Conception Lead.

6 How to integrate the Teenage Conception Audit Form into your clinical practice

Instructions for midwifery, obstetrics & gynaecology, termination of pregnancy services or sexual health services treating patient

Young women presenting to services for care having conceived before their 18th birthday will require completed forms:

- In maternity services prior to childbirth or at childbirth
- In termination of pregnancy services at termination
- In sexual health services (if previous pregnancy is noted in the sexual history)
- In early pregnancy assessment units
- In Specialist young person services (e.g. LAC nurse)

The Health Care professional will provide appropriate contraceptive advice and intervention as per guidance

If further advice is required call the Teenage Conception Lead or for advice out of hours call the on call expert advice help line on 029 20402464

Ensure patient understands that the Sexual Health Service will undertake follow up and that the patient agrees to this

Ensure follow up referral appointment is booked and recorded on Teenage Conception Audit form

Complete blue pages of Teenage Conception Audit Form; the forms are specific to the health boards across Wales

Retain the blue pages in the patient’s notes.

Forward the rest of the form, in the addressed envelope provided, to the teenage conception lead in your area.