



Have your say on our Sexual Health Services Review

On behalf of Leicestershire County Council and Rutland County Council

Sexual health services for Leicestershire and Rutland comprise of the Integrated Sexual Health Service (ISHS) and Community Based Services (CBS).

- The Integrated Sexual Health Service (ISHS) is currently jointly commissioned by Leicester City, Leicestershire County and Rutland County Councils. The service comprises of main clinics (hub clinics) at Haymarket Health and Loughborough Health Centre alongside a number of smaller (spoke) clinics at Rutland Memorial Hospital, and across the county at Hinckley Health Centre, St. Luke's Hospital Market Harborough, and Coalville Community Hospital. (Throughout this survey, we refer to this as the hub and spoke model.) The Integrated Sexual Health Service also provides an online sexual health service which offers the provision of STI test kits, STI treatment, oral contraception, and emergency hormonal contraception.

- Community Based Services are commissioned individually by each authority and provide contraceptive services in communities. This may be delivered by either your GP or a local pharmacy.

Both the Integrated Sexual Health Service (ISHS) and Community Based Services (CBS) contracts end on 31 March 2024. As a result, Leicestershire and Rutland need to set up new contracts for these services.

We would like residents, users of our services, staff who provide sexual health services and partner organisations to complete this consultation. Your views are important to us and will help to shape future services.

Further information on the proposals can be found here:

<https://www.leicestershire.gov.uk/sexual-health-consultation>

Please read the supporting information provided before completing the questionnaire.

Thank you for your assistance. Your views are important to us. You will have the opportunity to leave comments at the end of each section if you wish to tell us more.

Please note: Your responses to the main part of the survey (including your comments) may be released to the general public in full under the Freedom of Information Act 2000. Any responses to the questions in the 'About you' section of the questionnaire will be held securely and will not be subject to release under Freedom of Information legislation, nor passed on to any third party.

- Q1 In what role are you responding to this consultation? Please tick all that apply.
- | | |
|---|-----------------------------------|
| <input type="checkbox"/> A person who uses sexual health services | Answer Q2, then skip to Q4 |
| <input type="checkbox"/> A family member / carer of someone who uses sexual health services | Answer Q2, then skip to Q4 |
| <input type="checkbox"/> Leicestershire or Rutland resident | Answer Q2, then skip to Q4 |
| <input type="checkbox"/> Interested member of the public | Answer Q2, then skip to Q4 |
| <input type="checkbox"/> An employee of a sexual health service | Skip to Q3 |
| <input type="checkbox"/> Representative of a voluntary sector organisation or charity | Skip to Q3 |
| <input type="checkbox"/> A NHS/health professional | Skip to Q3 |
| <input type="checkbox"/> Other (please specify) | Skip to Q4 |

If 'other', please specify

If you are responding as a family member/carer of someone who uses sexual health services, please complete the survey with their views.

- Q2 Which area do you live in? Please select one option only.
- ☐ Blaby
 - ☐ Charnwood
 - ☐ Harborough
 - ☐ Hinckley and Bosworth
 - ☐ Melton
 - ☐ North West Leicestershire
 - ☐ Oadby & Wigston
 - ☐ Rutland
 - ☐ Leicester City
 - ☐ Outside of Leicester, Leicestershire and Rutland
 - ☐ Prefer not to say

Q3 If you indicated that you are a representative of a service provider, voluntary organisation, charity, GP or other organisation in Q1, please provide your details

Name:	
Role/position:	
Organisation:	
Organisation postcode:	
Contact phone:	
Contact email:	

This information may be subject to disclosure under the Freedom of Information Act 2000

Section 1 - Current service

We would like to hear more about the current services you have used or tried to access in the past.

Q4 Have you used or tried to access sexual health services (either clinic, online or community-based services) in Leicestershire or Rutland? Please select one option only.

<input type="checkbox"/> Yes, in the last 6 months	Continue
<input type="checkbox"/> Yes, in the last year	Continue
<input type="checkbox"/> Yes, over a year a go	Continue
<input type="checkbox"/> No, I have never used or tried to access these services	Skip to Q9
<input type="checkbox"/> Prefer not to say	Skip to Q9
<input type="checkbox"/> Don't know	Continue

Which, if any, of the following sexual health services have you used or tried to access? Please tick all that apply.

<input type="checkbox"/> Integrated Sexual Health Service (ISHS) Clinic	Answer Q5
<input type="checkbox"/> Online sexual health services (e.g. for STI test kits)	Answer Q6
<input type="checkbox"/> GP service for long acting reversible contraception LARC (coil/implants)	Answer Q7
<input type="checkbox"/> Pharmacy for emergency hormonal contraception (morning after pill)	Answer Q8
<input type="checkbox"/> Prefer not to say	Skip to Q9
<input type="checkbox"/> Don't know	Skip to Q9

Please tell us about your most recent experience of using or trying to access an **Integrated Sexual Health Service (ISHS) Clinic**

Q5 How easy, if at all, was it to....? Please select one option per row only.

	Very easy	Fairly easy	Not very easy	Not at all easy	Not applicable	Don't know
Contact the Integrated Sexual Health Service (ISHS) Clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Get an appointment at a venue that suited you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Get an appointment at a time that suited you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have any further comments on your most recent experience at the Integrated Sexual Health Service (ISHS) Clinic please tell us below

Please tell us about your most recent experience of using or trying to access **Online sexual health services (e.g. for STI test kits)**

Q6 How easy, if at all, was it to....? Please select one option only.

	Very easy	Fairly easy	Not very easy	Not at all easy	Not applicable	Don't know
Use the online sexual health service (e.g. for STI test kits)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have any further comments on your most recent experience with an online sexual health service please tell us below

Please tell us about your most recent experience of using or trying to access a **GP service for long acting reversible contraception LARC (coil/implants)**

Q7 How easy, if at all, was it to....? Please select one option per row only.

	Very easy	Fairly easy	Not very easy	Not at all easy	Not applicable	Don't know
Contact a GP service for long acting reversible contraception LARC (coil/implants)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Book an appointment with a GP service for long acting reversible contraception, at a venue that suited you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Book an appointment with a GP service for long acting reversible contraception at a time that suited you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have any further comments on your most recent experience with a GP service for long acting reversible contraception LARC (coil/implants) please tell us below

Please tell us about your most recent experience of using or trying to access a **pharmacy for emergency hormonal contraception (morning after pill)**

Q8 How easy, if at all, was it to....? Please select one option per row only.

	Very easy	Fairly easy	Not very easy	Not at all easy	Not applicable	Don't know
Contact a pharmacy for emergency hormonal contraception (morning after pill)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access a pharmacy for emergency hormonal contraception (morning after pill)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have any further comments on your most recent experience with a pharmacy for emergency hormonal contraception please tell us below

Q9 To what extent were you satisfied or dissatisfied with the service provided by the following sexual health services? Please select one option per row only.

	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know	Not applicable
Integrated Sexual Health Service (ISHS) Clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Online sexual health services (e.g. for STI test kits)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GP service for long acting reversible contraception LARC (coil/implants)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pharmacy for emergency hormonal contraception (morning after pill)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Why do you say this?

Q10 If you have any further comments or suggestions about the sexual health service(s) you have used or tried to access across Leicestershire and/or Rutland, please tell us below

Section 2 - Accessing different types of sexual health services

The sexual health provision offers a range of services, including promoting good and safe sexual health, STI testing and treatment, and contraception. These services can be accessed in a variety of ways such as self-care using website information or online ordering, vending machines, community spoke clinics, sexual health hub clinics (face to face or by telephone/video), GP and pharmacy.

An STI test checks whether you have a sexually transmitted infection (STI). It is quick and painless. STI tests can be performed by using a urine (pee) sample, a blood sample or a swab. The type of sample needed will depend on the symptoms.

Q11 What would be your preferred method/s to access testing for suspected sexually transmitted infections? Please tick all that apply.

- ☐ Ordering test kit via an online sexual health service
- ☐ Sexual health vending machine
- ☐ GP
- ☐ Visiting a sexual health clinic
- ☐ Pharmacy
- ☐ No preference
- ☐ Don't know

Why do you say this?

Contraception refers to the various methods that are used to prevent pregnancy. There are many types to choose from and different methods suit different people. Some require a procedure to have them fitted and removed.

There are many different types of contraception which can be provided by sexual health services. These include:

- condoms (which also provide protection from STI's)
- long-acting reversible contraception (LARC) such as coils or hormonal implants
- oral contraception (often known as birth control pills)
- emergency hormonal contraception such as the coil or the morning after pill

Q12 What would be your preferred method/s to access the following contraceptive services?
Please tick all that apply.

	Ordering via an online sexual health service	Sexual health vending machine	GP	Sexual health clinic	Pharmacy	Not applicable	Prefer not to say
Condoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contraceptive pills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency hormonal contraception (morning after pill)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q13 What would be your preferred method/s to access **Long acting reversible contraception LARC (coil/implants)**? Please tick all that apply.

GP	Sexual health clinic	Not applicable	Prefer not to say
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q14 If you have any further comments or suggestions about accessing sexual health services in Leicestershire and Rutland please tell us below

Section 3 - Your preferences for accessing sexual health services

The Covid-19 pandemic and the availability of new technologies have changed people's preferences for the way sexual health services are accessed. For example, some people prefer to access services without having to leave their home, while others prefer to use face to face services but prefer that these services are located away from where they live. Some people also have preferences on the time of day that they would like to access services, while others have preferences on whether they want to speak to a health professional or not.

Q15 How important, if at all, is the **locality** when accessing sexual health services? Please select one option per row only.

	Very important	Fairly important	Not very important	Not at all important	Don't know
Available at home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Near to home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Near to work/ college or school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not local to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q16 How important, if at all, are the **opening hours** when accessing sexual health services? Please select one option per row only.

	Very important	Fairly important	Not very important	Not at all important	Don't know
Daytime hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening clinic hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weekend clinic hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q17 How important, if at all, is the form of contact when accessing sexual health services? Please select one option per row only.

	Very important	Fairly important	Not very important	Not at all important	Don't know
Opportunity to speak to a health professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-care options rather than speaking to a health professional (e.g. online services or vending machines)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q18 How would you prefer to access face to face sexual health services? Please tick all that apply.

- ☐ A turn up and wait service
- ☐ A telephone booking service
- ☐ An online booking service
- ☐ Other (please specify)
- ☐ No preference
- ☐ Don't know

If 'Other' please specify:

Why do you say this?

Q19 How far would you be willing to travel to access face to face sexual health services? Please select one option only.

- ☐ Under 15 minutes
- ☐ 15 - 30 minutes
- ☐ 30 - 60 minutes
- ☐ Over an hour
- ☐ No preference
- ☐ Don't know

Q20 How likely, if at all, is it that you will use the face to face clinic based in Leicester City if you have local options available to you? Please select one option only.

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Very likely | Fairly likely | Not very likely | Not at all likely | Don't know |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Why do you say this?

Sexual health vending machines allow fast and confidential access to free self-testing kits for sexually transmitted infections, condoms and pregnancy tests. They require some personal information to be entered to confirm that this is the right service for the individual, and to ensure there are no health needs that mean the individual needs to see a doctor or nurse.

Q21 Where would you prefer to access sexual health vending machines? Please tick all that apply.

- ☐ At sexual health service sites
- ☐ Pharmacies / chemists
- ☐ University buildings
- ☐ Children, young people and family centres
- ☐ Community venues e.g. community centres
- ☐ Other (please specify)
- ☐ Wouldn't want to access/use one
- ☐ No preference
- ☐ Don't know

If 'Other' please specify:

Why do you say this?

Q22 If you have any further comments or suggestions on the ways you access sexual health services in Leicestershire and Rutland please tell us below

Section 4 - Sexual health awareness, advice and health promotion

We would like to increase the amount of information available to enable people to manage their sexual health better. This includes the provision of information on sexual health services, provision of advice and promotion of positive sexual health.

Q23 To what extent, if at all, are you aware of sexual health services in Leicestershire and/or Rutland? Please select one option only.

- A great deal

☐
- To some extent

☐
- Not very much

☐
- Not at all

☐
- Don't know

☐

Why do you say this?

Q24 **How** would you like to be made aware of sexual health services (such as STI testing, STI treatment and contraception)? Please tick all that apply.

- ☐

Face to face
- ☐

Social Media
- ☐

Emails
- ☐

Leaflets/ Hard copies
- ☐

Webinar/ training sessions
- ☐

Other (please specify)
- ☐

Don't know
- ☐

No preference

If 'Other' please specify:

Q25 Where would you like to see sexual health services (such as STI testing, STI treatment and contraception) advertised? Please tick all that apply.

- ☐ In existing health & wellbeing services e.g. GPs and pharmacies
- ☐ In community venues e.g. local community centre, library
- ☐ In schools/ colleges/ universities
- ☐ Workplaces
- ☐ Other (please specify)
- ☐ Don't know
- ☐ No preference

If 'Other' please specify:

If you said you would like to be made aware of sexual health services promoted on social media channels in Q24 please answer Q26. Otherwise please skip to Q27.

Q26 Which social media channels would you like to see sexual health services promoted on? Please tick all that apply.

- ☐ Facebook
- ☐ Snapchat
- ☐ Youtube
- ☐ TikTok
- ☐ Tumblr
- ☐ Twitter
- ☐ Instagram
- ☐ Pintrest
- ☐ Other channels (please specify)
- ☐ Don't know
- ☐ No preference

If 'Other channels', please tell us which other channels you would like to see sexual health services promoted on:

Q27 How likely, if at all, is it that you would use a telephone service to speak to someone and get support and/or advice to manage your sexual health?

Please select one option only.

Very likely

☐

Fairly likely

☐

Not very likely

☐

Not at all likely

☐

Don't know

☐

Q28 If you have any further comments on sexual health awareness, advice and health promotion in Leicestershire and Rutland please tell us below

Section 5 - Outreach service provision

Outreach services are designed to break down barriers to testing and treatment by taking services closer to the communities at risk. Outreach services can provide support around STI prevention contraception and Chlamydia screening.

Q29 Which groups do you feel should be provided with outreach services? Please tick all that apply.

- ☐ Young people
- ☐ Vulnerable people (e.g. someone with a learning disability)
- ☐ Sex workers
- ☐ Men who have sex with men
- ☐ Rough sleepers
- ☐ LGBTQ+ community
- ☐ Travelling Community
- ☐ Other (please specify)
- ☐ Don't know

If 'Other', please specify:

Q30 Which, if any, of the following areas do you feel have a greater need for outreach services?
Please tick all that apply.

- ☐ Blaby
- ☐ Charnwood
- ☐ Harborough
- ☐ Hinckley and Bosworth
- ☐ Melton
- ☐ North West Leicestershire
- ☐ Oadby & Wigston
- ☐ Oakham
- ☐ Uppingham
- ☐ Empingham
- ☐ Rutland
- ☐ Don't know

Please let us know why you feel there is greater need for outreach service in these areas?

Q31 If you have any further comments or suggestions about outreach service provision in Leicestershire and Rutland please tell us below

Please continue if you said in Q1 that you are responding as 'A person who uses sexual health services', 'A family member / carer of someone who uses sexual health services', 'Leicestershire or Rutland resident' or 'Interested member of the public'.

Otherwise, please skip to the instructions at the end of the questionnaire.

About you

Leicestershire County Council is committed to ensuring that its services, policies, and practices are free from discrimination and prejudice, address the needs of all sections of the community and promote and advance equality of opportunity.

Many people face discrimination in society because of their personal circumstances and for this reason we have decided to ask these monitoring questions.

We would therefore be grateful if you would answer the following questions. You are under no obligation to provide the information requested, but it would help us greatly if you did.

Q32 What is your gender? Please select one option only.

- ☐ Male
- ☐ Female
- ☐ I use another term

Q33 Is the gender you identify with the same as your sex registered at birth? Please select one option only.

- ☐ Yes
- ☐ No

Q34 What was your age on your last birthday? (Please enter your age in numbers not words)

Q35 What is your full postcode?

This will allow us to see how far our services reach people. It will not identify your house.

Q36 Are you a parent or carer of a young person aged 17 or under? Please select one option only.

☐ Yes

Continue

☐ No

Skip to Q38

Q37 If yes, what are the ages of the children in your care? Please tick all that apply.

☐ 0-4

☐ 5-10

☐ 11-15

☐ 16-17

Q38 Are you a carer of a person aged 18 or over? Please select one option only.

☐ Yes

☐ No

Q39 Do you have a long-standing illness, disability or infirmity? Please select one option only.

☐ Yes

Continue

☐ No

Skip to Q40

☐ Prefer not to say

Skip to Q40

If you said you have a long-standing, disability or infirmity, please can you tell us what your long-standing illness, disability or health condition relates to?

Please tick all that apply.

☐ Head injury

☐ Hearing (deafness, severe hearing impairment)

☐ Learning difficulty or disability (e.g. Down's syndrome, dyslexia, autism)

☐ Mental health (e.g. depression, schizophrenia)

☐ Mobility (e.g. using a wheelchair)

☐ Physical impairment (e.g. difficulty using your arms)

☐ Visual (blindness, severe visual impairment)

☐ Long-standing illness or health condition (e.g. cancer, HIV, diabetes, chronic heart disease, epilepsy)

☐ Other (please specify)

☐ Prefer not to say

If 'Other', please specify:

Q40 What is your ethnic group? Please select one option only.

- ☐ White
- ☐ Mixed
- ☐ Asian or Asian British
- ☐ Black or Black British
- ☐ Other ethnic group

Q41 What is your religion? Please select one option only.

- ☐ No religion
- ☐ Christian (all denominations)
- ☐ Buddhist
- ☐ Hindu
- ☐ Jewish
- ☐ Muslim
- ☐ Sikh
- ☐ Any other religion

Q42 Which best describes your marital/relationship status? Please select one option only.

- ☐ Single
- ☐ In a relationship but not cohabiting
- ☐ In a relationship and cohabiting
- ☐ Married/In a registered civil partnership
- ☐ Married/In a registered civil partnership but separated
- ☐ Divorced/dissolved civil partnership
- ☐ Widowed/surviving partner in civil partnership
- ☐ Other (please specify)
- ☐ Prefer not to say

If 'Other', please specify:

Q43 What is your sexual orientation? Please select one option only.

- ☐ Bi
- ☐ Gay or Lesbian
- ☐ Straight/ Heterosexual
- ☐ I use another term

Thank you for your assistance. Your views are important to us.

We will analyse all the responses once the consultation has ended (midnight on 12 March 2023). A summary of the findings will be added to a report that will be presented to each Local Authority (Leicestershire County Council and Rutland County Council) for final consideration.

A formal decision on how future sexual health services will look is expected by May 2023.

Please return your completed survey to:

Sexual Health Services Consultation
Public Health Business Support
Room G58
Leicestershire County Council
Have Your Say
FREEPOST NAT18685
Leicester
LE3 8XR

Data Protection: Personal data supplied on this form will be held on computer and will be used in accordance with current Data Protection Legislation. The information you provide will be used for statistical analysis, management, planning and the provision of services by the county council and its partners. Leicestershire County Council will not share any personal information collected in this survey with its partners. The information will be held in accordance with the council's records management and retention policy. Information which is not in the 'About you' section of the questionnaire may be subject to disclosure under the Freedom of Information Act 2000.