



CLINICAL PROTOCOL Sexual Health Service – Safeguarding Users Accessing Online Postal STI Testing Services

Protocol Number	CPR024	
Version:	V2	
Purpose:	Health Advisor protocol for safeguarding patients who access the online testing service	
Consultation:	Clinical Policy Group, Locality and Clinical Directors	
Approved by:	Clinical Policy Group	
Date approved:	10/05/2023	
Author:	Dr Ayo-ola Okunwobi Smith – Safeguarding Lead Sexual Health	
Date issued:	18/05/2023	
Review date:	01/05/2026	
Audience:	All staff working within the Sexual Health Service should follow this Protocol when providing care in relation to the online testing service	
Dissemination:	Will be made available on the Trust Intranet Will be available within local clinic guidelines	
Impact Assessments:	This Protocol has been subjected to an Equality Impact Assessment. This concluded that this policy will not create any adverse effect or discrimination on any individual or particular group and will not negatively impact upon the quality of services provided by the Trust.	

Version History

Version	Date Issued	Reason for Change
V1	22/12/2020	New Protocol
V2	18/05/2023	Change in practice

SUMMARY

The Department of Health (July 2018) guidance "Working Together to Safeguard Children", clearly states that everyone who comes into contact with children and families has a role to play in safeguarding children and protecting them from harm.

The aim of this protocol is to direct staff on how to manage safeguarding concerns raised by service users accessing the online STI testing postal service, within the Sexual Health Service of GHC.

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ABBREVIATIONS

Abbreviation	Full Description	
GHC	Gloucestershire Health and Care NHS Foundation Trust	
BASHH	British Association of Sexual Health and HIV	
FSRH	Faculty Sexual and Reproductive Health	
STI	Sexually Transmitted Infections	
HIV	Human Immunodeficiency Virus	
NFA	No Further Action	

1. INTRODUCTION

- **1.1** Hope House Sexual Health Service, with respect to online testing, is predominantly commissioned to provide:
 - Testing, treatment and management for sexually transmitted infections (STIs);
 - Improvements in the diagnosis and effective management of STIs and HIV.
 - Improvements in uptake of STI and HIV testing.
- 1.2 As part of our commissioned service we operate an online postal testing kit and results notification service which is available to all service users aged 16 and over who contact the service for asymptomatic STI testing. The online service has enabled and empowered users to access their healthcare in more ways than through a face-to-face consultation with a health care professional and has enormous potential in improving the uptake of STI and HIV testing throughout Gloucestershire.

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- 1.3 Online services accessed by the patient need to be safe and of the same quality and standard that would be expected irrespective of the mode of contact. It is therefore important, just as with face to face consultations, that there are demonstrable systems in place to identify safeguarding issues (including Child Sexual Exploitation) in the case of children, and vulnerable service users who are potentially 'at risk' (e.g. by flagging multiple accounts or frequent requests or by assessing concerns regarding capacity to consent).
- 1.4 Online testing is not available to service users aged under 16 years. New General Data Protection Regulation (GDPR) and data protection laws expect services to demonstrate that individuals who are aged under 16 years have the competency to consent to their data being collected and processed remotely. Legally this would be difficult to show through an online service without confirming age and identification. Therefore, service users under the age of 16 years seeking to access the online service are directed to contact the Specialist Sexual Health Service, where they will be seen for a face to face consultation by a clinician trained to assess Fraser Competency.
- 1.5 This Protocol is therefore written in relation to the 'Safeguarding' of 16-17 year olds and vulnerable service users who access the online service. It is written to provide guidance to the Health Advising Team and outline the procedure for identifying, addressing and escalating concerns when they become known.
- **1.6** This Protocol must be used in conjunction with the following organisational documents:
 - National policy on safeguarding children and Adults at risk of abuse or neglect.
 - Trust policy on safeguarding children and Adults at risk of abuse or neglect.
 - FSRH
 - BASHH

2. PURPOSE

2.1 This Protocol provides guidance and direction to staff to ensure the safe and effective management of patients who access online testing services, in line with local lead agency policies and procedures.

3. SCOPE

3.1 This document applies to all staff working within the within the Sexual Health Service.

4. DUTIES

4.1 General Roles, Responsibilities and Accountability
Gloucestershire Health and Care NHS Foundation Trust (GHC) aims to take all reasonable steps to ensure the safety and independence of its patients and service users to make their own decisions about their care and treatment.

In addition GHC will ensure that:

- All employees have access to up to date evidence based policy documents.
- Appropriate training and updates are provided.
- Access to appropriate equipment that complies with safety and maintenance

requirements is provided.

Managers and Heads of Service will ensure that:

- All staff are aware of, and have access to policy documents.
- All staff access training and development as appropriate to individual employee needs.
- All staff participate in the appraisal process, including the review of competencies.

Employees (including bank, agency and locum staff) must ensure that they:

- Practice within their level of competency and within the scope of their professional bodies where appropriate.
- Read and adhere to GHC policy
- Identify any areas for skill update or training required.
- Participate in the appraisal process.
- Ensure that all care and consent complies with the Mental Capacity Act (2005) see section on MCA Compliance below.

5. MENTAL CAPACITY ACT COMPLIANCE

- **5.1** Where parts of this document relate to decisions about providing any form of care treatment or accommodation, staff using the document must do the following: -
 - Establish if the person able to consent to the care, treatment or accommodation that is proposed? (Consider the 5 principles of the Mental Capacity Act 2005 as outlined in section 1 of the Act. In particular principles 1,2 and 3) Mental Capacity Act 2005 (legislation.gov.uk).
 - Where there are concerns that the person may not have mental capacity to make a specific decision, complete and record a formal mental capacity assessment.
 - Where it has been evidenced that a person lacks the mental capacity to make a specific decision, complete and record a formal best interest decision making process using the best interest checklist as outlined in section 4 of the Mental Capacity Act 2005 Mental Capacity Act 2005 (legislation.gov.uk).
 - Establish if there is an attorney under a relevant and registered Lasting Power of Attorney or a deputy appointed by the Court of Protection to make specific decisions on behalf of the person (N.B. they will be the decision maker where a relevant best interest decision is required. The validity of an LPA or a court order can be checked with the Office of the Public Guardian) Office of the Public Guardian - GOV.UK (www.gov.uk).

6. PROTOCOL DETAIL

6.1 Safeguarding 16-17 Year Olds

All service users aged 16-17 accessing the online testing service will be directed to answer a number of risk assessment questions and a Safeguarding assessment including questions to ascertain the risk of Child Sexual Exploitation (CSE) (see Appendix 1 for questions).

Any positive response to a safeguarding question is a 'trigger' and is either a 'red' flag question (high risk) or an 'amber' flag question (medium risk).

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A positive response to one or more safeguarding questions trigger a call-back by a Health Advisor, and the online account is locked so that a kit is not automatically sent.

The service user will be contacted via SMS / phone call the same day or next working day if outside of working hours.

Text to read "Thanks for your request for a home testing kit. Please call us for a chat before we send you the kit so that we can be sure we are supporting you in the best way we can. Please call us on 0300 421 6524"

If the service user responds the trigger is discussed in length and a safeguarding assessment is carried out over the phone and a decision will be made as to how we proceed, this will be communicated with the service user. The outcome may be to release the kit, offer a clinic appointment and/or complete a Safeguarding Referral to the Local Authority Children's Services MARF (Multi Agency Request Form).

If the service user does not respond we ensure that we have made **3** attempts to contact at different times and in different ways e.g. text, email, call, within 72 hrs. If the trigger is an amber flag; No Further Action is taken at this point and the kit will be released. For 1 or 2 amber flags in a year, a kit can be sent. Clinician discretion is necessary, please ask for support from your line manager if you are unsure.

If 2 amber flags occur more than twice in a year, further information gathering is required and a decision to involve other services considered such as school nursing (see pathway) or GP.

If the trigger is a red flag, following 3 attempts we send a 4th bespoke SMS text to read "Thanks for your request for a home testing kit. We do need to have a chat with you before we can send the kit as we are concerned. If we don't hear from you we may need to share your information with children's social services, your school nurse or GP"

If we do not hear from the young person within a further 24 hours the Health Advisor will follow the School Nursing Team algorithm (see appendix 3). If contact is still not made then seek advice if necessary from the safeguarding team within GHC and submit a MARF to the Local Authority Children's Social Care at the Multi Agency Safeguarding Hub (MASH).

GHC safeguarding team should be informed of and coded appropriately on Lilie, SHARD code 31 and GUMCAD CSE1-3 (if appropriate).

Three amber flags equal a red flag and should be managed accordingly.

6.2 Vulnerable Adults

6.2.1 Sexual Assault

If a service user aged 18 years or over answers 'yes' to the sexual assault question this will also trigger a call back, however the account is not locked and the kit will still be sent. See Hope House Safeguarding policy - Sexual violence.

The service user will be contacted via SMS the same day or next working day if outside of working hours asking them to contact the Health Advising team.

If the service user responds, we check that they are safe and ok and that there is no risk of further harm. Do a general safeguarding assessment.

If the service user does not respond we ensure that we have made 3 attempts at contact at different times and in different ways, including a call or email. The final message could be SMS. For example initial contact phone call, then email and finally SMS.

If no response, NFA as they are over the age of 18 years old.

Sexual Assault trigger for **under 18's** is dealt with as a red flag and is dealt with accordingly as <u>6.1</u>.

6.2.2 Frequent Requests

The online testing service requires users to register with their mobile phone and is designed to prevent users from having multiple accounts. Users will be able to request up to 2 postal kits in any 6 month period. On attempts to obtain a 3rd they will be blocked and directed to call the Specialist Sexual Health Service where they will be able to discuss their request with a Health Advisor. The outcome may be that the block is lifted and a kit is sent or that they are requested to attend clinic.

7. PROCESS FOR MONITORING COMPLIANCE

Are the systems or processes in this document monitored in	YES
line with national, regional, trust or local requirements?	IES

Monitoring Requirements and Methodology	Frequency	Further Actions
Compliance of this document will be demonstrated through audits.	annually	The outcomes of the audit will be presented to the wider service and logged with the Trust audit team. The Medical Lead and Service manager will be responsible for the development and monitoring of any identified actions within the scope of the audit.

8. INCIDENT AND NEAR MISS REPORTING AND SPECIFIC DUTY OF CANDOUR REQUIREMENTS

8.1 To support monitoring and learning from harm, staff should utilise the Trust's Incident Reporting System, DATIX. For further guidance, staff and managers should reference the <u>Incident Reporting Policy</u>. For moderate and severe harm incidents specific Duty of Candour requirements must be considered and guidance for staff can be found in the <u>Duty of Candour Policy</u> and Intranet resources.

9. TRAINING

9.1 All staff who consult with service users, either directly or indirectly should be adequately trained in the safeguarding of adults and young people, with this kept up-to-date. Any staff involved in direct clinical contact, e.g. in telephone consultations, should be trained to level 3 safeguarding.

10. ASSOCIATED DOCUMENTS

- CLP071 GHC Safeguarding Children Policy
- Spotting the Signs
- Standards for Online and Remote Providers of Sexual and Reproductive Health Services. Joint BASHH/FSRH standard. January 2020
- Department of health "Working Together to Safeguard Children"
- Under 18 Risk Assessment
- Under 18 Risk Assessment Return Visit
- Hope House Safeguarding Policy

Appendix 1

SH.UK Safeguarding Questions and Flag Assigned

Q1 Are any of the people you have sex with more than 5 years older or younger than you? **Red** flag

Q2 Do any of the people you have sex with have responsible jobs – police officer, teacher, social worker, youth worker, sports club coach or anything similar? **Red** flag

Q3 Have you ever been physically hurt or felt scared or uncomfortable by anyone you have had sex with? Red flag

Q4 Have you ever felt like you couldn't say NO to sex? Red flag

Q5 Has anyone ever given you gifts, money, drugs, alcohol or protection for sex? Red flag

Q6 Do you take drugs or drink alcohol weekly? Amber flag

Q7 Have you ever been involved in sending or receiving messages of a sexual nature, or does someone have sexual pictures of you? Amber flag

Q8 Have you tried to hurt yourself or self-harm? Amber flag

Q9 Do any services/professionals help and support you - Social Workers, CAMHS team or anyone else? Amber flag

Consultation questions that will also trigger safeguarding if under 18:-PAGE 2, Q2 - Have you recently been a victim of a sexual assault? Red flag

PAGE 3, Q1 - Are you a sex worker, or have you had sex with a sex worker? Red flag

Page 3, Q2 - Do you have to take drugs or drink alcohol before or during sex? Red flag

PAGE 3, Q 3 - Have you injected drugs, or had sex with someone who injects drugs? Red flag

PAGE 4, Q4 - Do you engage in sex parties, fisting, group sex or anonymous sex? (MSM, Bi, Trans only) Red flag

Appendix 2 - Useful Safeguarding Contact Numbers

School Nursing

Choose from your area to see the relevant list of services and contacts **Forest of Dean**

Dilke Memorial Hospital Speech House Road, Cinderford GL14 3HX 0300 421 8661 8662

FodLocality.SNT@ghc.nhs.uk

Gloucester

Rikenel Montpellier GL1 1LY 01452 895240 GlosSNLT@ghc.nhs.uk

Tewkesbury

Tewkesbury Community Hospital Barton Road GL20 5QL 0300 421 6161 tewkslocality.snt@ghc.nhs.uk

Cheltenham

Springbank Community Resource Centre Springbank Way Cheltenham GL51 0LG 0300 421 8514 cheltlocal.snt@ghc.nhs.uk

Cotswolds

Cirencester Locality Offices Cirencester Hospital Tetbury Road 0300 421 8906 Cots.snt@ghc.nhs.uk

Stroud

Stroud Maternity Hospital Field Road Stroud GL5 2JB 0300 421 8959 / 8960 stroudlocality.snt@ghc.nhs.uk

Sexual Assault

The Bridge Sexual Assault Referral Centre for under 18's – 0117 342 6999 Sexual Assault Referral Centre Gloucester - 03004218400 Gloucestershire Rape and Sexual Abuse Centre (GRASAC) - 01452 305421

VANS

*mobile - 07791229575

*Claire Raven – administrator – 03004218404

*VANS Hope House vanshopehouse@ghc.nhs.uk

Perinatal Midwives

Support for women for whom there are concerns regarding the pregnancy i.e. drug/ alcohol/ domestic abuse.

03004222288

03004225526

Specialist midwife Jo Daubney - 07884260352

Vulnerabilitywomensteam@nhs.net

Other Support Services

Homepage - Mermaids (mermaidsuk.org.uk) - support for parents and transgender children

Young Gloucestershire - Home (youngglos.org.uk)

Parents Against Child Exploitation (Pace) UK (paceuk.info)

Home 3 - Tic+ (ticplus.org.uk)- 'teens in crisis' – counselling and support

https://www.beateatingdisorders.org.uk/- eating disorder charity

<u>Homepage | Campaign Against Living Miserably (CALM) (thecalmzone.net)</u> suicide prevention charity, predominantly for young men

Appendix 3 – Public Health Nursing Sexual Health SOP

Please click on the link below to access the SOP:

Public Health Nursing Sexual Health SOP

Appendix 4 – No Contact Letter Template

Please click on the link below to download the Template:

Sexual Health Services Young Person No-Contact Template