

Consultation impact summary

Consultation learning, actions and mitigations

This consultation was about closing the drop-in sexual health clinic for young people in Lewes and the surrounding areas. The consultation started on 21 July 2025 and closed on 28 September 2025. 120 people took part in the consultation.

The table below sets out the key learning identified from respondents' comments on the proposed change and how people would be affected. It also sets out clarifications, actions and mitigations aimed at addressing each point.

Table: You said, we did

You said	What we will do in response
You disagree with the proposal to stop funding the clinic because it is a vital service for young people in the local area.	<p>The consultation has demonstrated strong support for what is seen as a valuable local service. The initial funding was focused on young people accessing the drop in who were not registered with the GP practice running the service however it became clear through this consultation that the majority of young people who use the service are registered patients, but importantly do not see the service as a GP service due to its drop in facility in a non GP surgery site.</p> <p>The danger that young people would refrain from accessing services if the circle room drop in were not in operation was clear. This is a concern that young people have a lack of knowledge of other locally accessible services. The council and providers need to ensure that we assist the young person's journey from local young persons to general sexual health services for those aged over 25.</p> <p>An example of the difficulty with online and generic GP service access were identified in the consultation as follows. Young people at school are not allowed phones and therefore cannot easily access alternative online services. To book a GP appointment takes online access or sitting waiting in a phone system and some young people will feel excluded due to this.</p> <p>Action</p> <p>Recognise the value of the local face to face drop in service model and acceptability. Review initial targeting of non-registered patients and adapt service model to ensure awareness and practise use of the</p>

	<p>wider sexual health system in preparation for being aged over 24 or not being resident in the Lewes area anymore . Introduce online service kits, signup to the local condoms distribution scheme</p>
<p>The Circle Room offers a range of specialist and confidential advice from supportive staff in one place that isn't available from other services locally.</p>	<p>We recognise that the Circle room does offer a good range of specialist services at a local level, and the consultation identifies the value of these services to the respondents. It is evident that there would feel to be a significant gap for the current service users.</p> <p>However, this also highlights a lack of knowledge of other services available via the community pharmacy and online.</p> <p>However in meetings with the service leads and through some feedback it is strongly apparent that having this drop in has resulted in avoidance of unwanted pregnancies, and related costs.</p> <p>Action</p> <p>We will maintain specialist input whilst ensuring awareness of alternative services available beyond 25 years old. We will make sure that transition methods are in place for young people using Young persons services, eg staff to encourage service users to familiarise with online offer (STI testing Smartkits' and online condom scheme)</p>
<p>GP services don't offer the same specialist support, and it would be harder to get an appointment.</p>	<p>This is a GP service, but funding is provided for a drop in session outside of the normal rules around GP appointments. It is recognised that the immediacy of a set drop-in session is much more accessible compared to trying to book appointments and travel to services.</p> <p>Action</p> <p>Although we cannot directly address issues with GP access generally, we can discuss with the local NHS Sussex organisations how these barriers can be overcome.</p> <p>All local GPs do provide an excellent contraception service across the county which is demonstrated by most women accessing contraception through their GP. There are other access points for contraception and STI testing that are alternatives to GPs for example</p>

	<p>Community pharmacies offer Contraception condoms and EHC.</p> <p>Specialist sexual health clinics offer STI and HIV testing, contraception and HIV PrEP</p> <p>Online services offer service as follows <u>for over 16s</u>:</p> <ul style="list-style-type: none"> • STI and HIV testing • Emergency hormonal contraception • Condoms <p>The online service works with the specialist service, and any complications or issue are managed face to face by the staff at the specialist sexual health services.</p> <p>STI tests that test positive are followed up by specialist sexual health services and any complexity is directly managed by a face-to-face specialist consultant led service.</p>
<p>The clinic is accessible, both due to its location and the fact it's a walk-in service. Travelling further to get to services isn't appealing and, in some cases, would be impossible.</p>	<p>Whilst this is correct for the current under 25 service users, it is also apparent that the provider needs to ensure that young people are prepared for service access post leaving the local area (i.e. university/college/work/migration), understand the mixed sexual health services to be used aged 25 and over which include community pharmacy, other clinics and online (the latter which should be nearly always accessible 24/7).</p> <p>Action</p> <p>Review of service outcomes to include experiencing other services and preparation for accessing over 24 years old services.</p> <p>Use Smart kits (postal STI testing kits) or online condoms scheme within existing face to face services to introduce to online services.</p> <p>ESCC to better advertise alternative service for all East Sussex residents with a particular target at the 15-24 age range, through sexual health website, social media, youth services and school health.</p>
<p>It would reduce young people's access to sexual and reproductive health services. This could lead to riskier sexual health practices, a rise in teenage pregnancies, and greater anxiety and stigma</p>	<p>The consultation does identify the potential to reduce access to services, however similar services are available. It is possible that using one service may mean young people fail to recognise what other services are available nor do they access them, it is important that this is addressed in the Circle room attendance as part of a mixed access offer for when they leave the area and are older than 25.</p>

around testing for young people.	
You don't know where you go for services instead and you might use a clinic outside East Sussex. You are unwilling to use online services instead, as seeing a professional in person is more reassuring.	It is apparent using one service means young people fail to recognise what other services are available nor do they access them, it is important that this is addressed as part of an access offer in particular for when they leave the area and are older than 25.
Any financial savings would be negated by costs and pressure being transferred to other parts of the healthcare system.	<p>This is a very strong argument for example avoiding unintended pregnancy through specialist contraceptive advice is suggested to return £9 for every £1 spent Contraception: Return on Investment (ROI) report mainly due to the avoidance of costs of intended/unwanted pregnancy.</p> <p>Failure to get STI tested and diagnosed and treated can result in long term health issues.</p> <p>Failure to access HIV testing and treatment can result in permanent life-threatening events and long term treatment expense.</p> <p>Failure to access condoms and HIV PrEP can result in transmittable infections</p> <p>Qualitative feedback demonstrates the success of this service addressing young women who had already had an unwanted pregnancy leading to abortion being able to access reliable and appropriate contraception preventing further unwanted pregnancy or subsequent unwanted child.</p>