



# Sexual Health Quarterly Bulletin

Available online at: [www.cph.org.uk/expertise/sexual-health/](http://www.cph.org.uk/expertise/sexual-health/)

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## Cumbria & Lancashire Sexual Health Networks Update

by Cathryn Beckett-Hill

On behalf of Lancashire, Cumbria, Blackpool and Blackburn with Darwen



Cumbria & Lancashire  
Sexual Health  
Networks

Most of our efforts over the last few weeks have been directed towards preparation for procurement. To feed into this process we jointly hosted a Provider Information Day on 9<sup>th</sup> December, attended by representatives from a range of potential providers. The morning offered brief overviews from commissioners in each area on latest indicators and current service provision. It was interesting to see the wide variation in population demographics, geography, system complexities and budgets between our areas. We then offered an explanation of the procurement processes and potential service models that we are currently exploring, followed by an open questions and answers session before lunch. During the afternoon, providers were given the opportunity for individual discussion with each commissioner.

Whilst Lancashire, Blackpool and Blackburn with Darwen will continue to jointly procure, working towards new contracts starting April 2016, Cumbria will be working to an accelerated procurement timeline so that a new contract can begin in October 2015. Cumbria is also working very closely with NHS England to explore potential collaborative procurement for HIV treatment locally.

Although prevalence of HIV in Cumbria is low at 0.50 per 1,000 15-59 year olds, the rate of late diagnosis is high (62%). We are currently working with a local LGBT charity to develop a sustainable prevention model in one of the

saunas in Cumbria. Added to that over the coming weeks we will be working with sexual health services on plans to reduce late HIV diagnoses, for which primary care will play a key role.

It is very timely therefore that MEDFASH have just launched their new online educational tool for primary care colleagues: HIV Testing in Practice (HIV TIPS). GPs or practice nurses who wish to increase their own skills in HIV testing, or who would like to work with their teams to boost overall testing rates, will find plenty to do using HIV TIPS. It provides updates about HIV testing in primary care and includes patient stories, quizzes, group exercises, downloadable teaching materials and an HIV testing audit tool. It should help GPs and practice nurses to:

- find out more about the importance of HIV testing in general practice
- reflect on obstacles (barriers & challenges) to HIV testing
- improve their own ability to diagnose HIV
- improve their team's ability to diagnose HIV
- change HIV testing practice in their team

The HIV TIPS toolkit is available at: <http://www.medfash.org.uk/hiv-tips>

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# North West - Sexually Transmitted Infections Surveillance

Roberto Vivancos, Consultant Epidemiologist: Public Health England, Field Epidemiology Services North West



## New diagnoses of HIV in the North West

The beginning of December marks World AIDS Day, a time to take stock of the epidemic that has expanded over two decades. It is also a time when national and local HIV and AIDS data is published. In the last 10 years the number of new HIV diagnosis has continued to fall. The reduction is consistent across all areas of the North West.

Rates of new diagnosis are higher in Manchester followed by Blackpool and Salford (see figure 1). Other local authorities have rates significantly lower than the England rate of new diagnosis.

The decrease in new diagnosis rates has been more marked in Black African ethnic groups in all areas, with most new cases in the NW from white ethnic groups (see figure 2). In the white ethnic group there has also been a reduction in the annual number of new cases, but this has been slight, and primarily in Greater Manchester and Cumbria & Lancashire, with numbers in Cheshire & Merseyside stabilising in the last few years.

In the last five years the new diagnosis in men who have sex with men (MSM) has overtaken that in heterosexual contact. Although significant there have been

declines in these transmission routes in the last 10 years (figure 3).

There is still great variation across the region in the proportion of late diagnosis, which range from 66% to 31% of new diagnosis made late. Therefore, these encouraging trends should not detract from the efforts in reducing late diagnosis of HIV, as early diagnosis is key for more successful management of the illness.

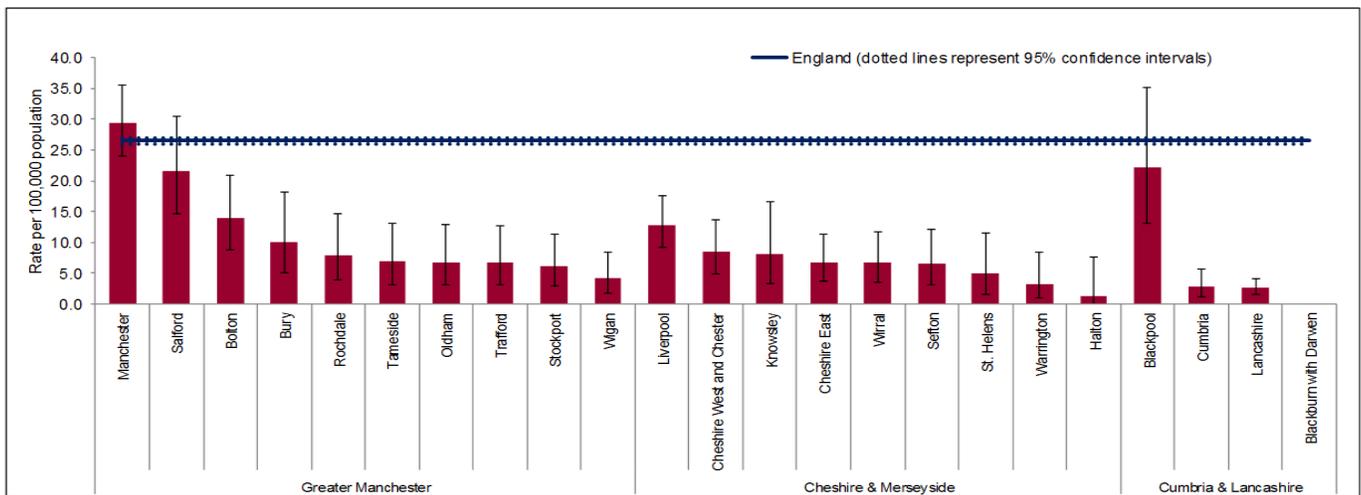


Figure 1: Incident rate by local authorities in the North West

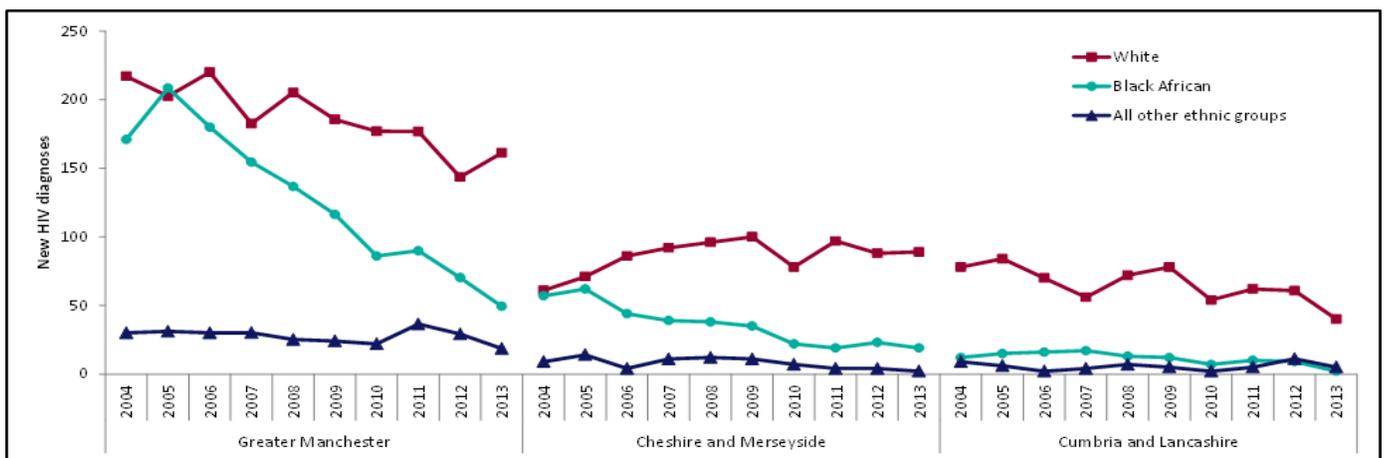


Figure 2: Trend in new diagnosis of HIV by ethnic background

## North West - Sexual Transmitted Infections Surveillance continued

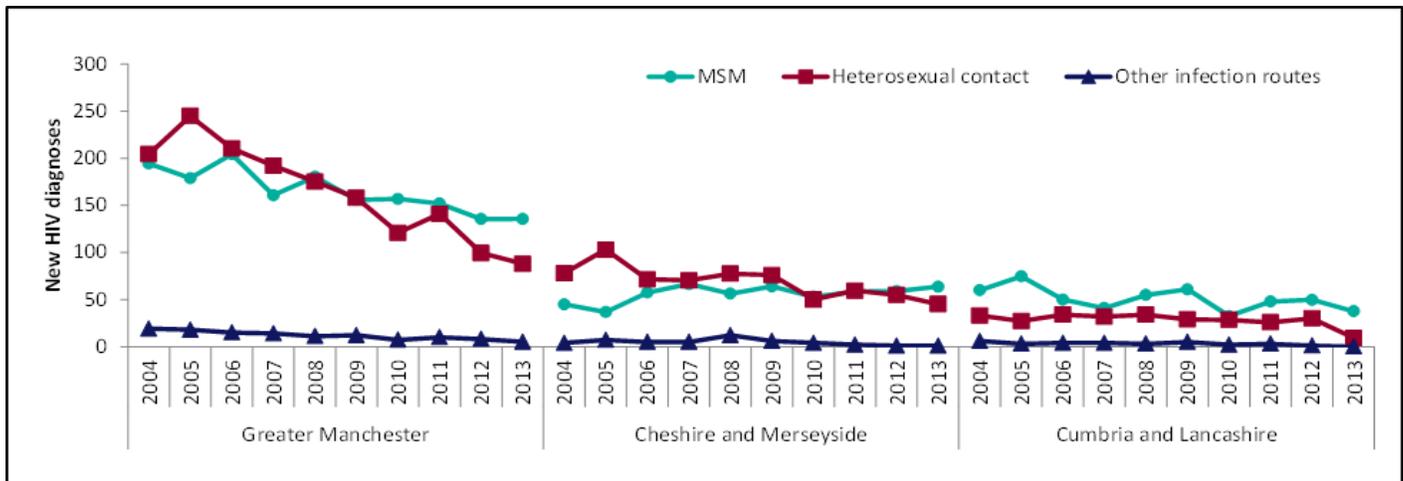


Figure 3: Trend in new diagnosis of HIV by sexual orientation

longer healthier lives



Liverpool Community Health NHS Trust

## Case Study: HIV and Pain Management by Bob Downes

**HIV and pain management; an example of two HIV care providers working collaboratively to improve the lives of individuals living with HIV and experiencing pain.**

A group of local HIV service users have worked in partnership with Liverpool Community Health NHS Trust and Sahir House, Merseyside's HIV voluntary organisation to develop a Pain Management Peer Support Group based at Sahir House.

The support group has evolved following consultation with patients diagnosed with HIV who experience pain with the aim of providing peer support to improve their quality of life.

The inaugural meeting was in January 2013 and has been very well attended, on average around 10 people attend each session, the sessions are for 2 hours and are divided into an hour with a clinical focus, followed by an hour of therapeutic activity. All the sessions have been evaluated and rated as good to excellent by those who attend.

The meetings are held on a monthly basis and are facilitated by Robert Downes, a

Community Specialist HIV Nurse and Kathleen Charters, Therapies Coordinator from Sahir House.

Patients who attend the group are given information and advice on pain management, managing fatigue, the appropriate use of medication and will have input by other allied health professionals from Liverpool Community health NHS Trust and the wider health economy. The therapy sessions also provide insight into complimentary therapies such as mindfulness, meditation, acupuncture and art therapy to help with managing and alleviating pain associated with HIV.

Robert Downes, Specialist HIV Nurse explains: "We aim to improve the quality of life for the group members in ways that are meaningful to them as individuals. The sessions provide opportunities to share experiences and hopefully introduce new ways to manage pain and fatigue."

Robert continues: "The experiences of the group members will be evaluated and the findings will be used to further develop and enhance the group's experience. The peer support group is an

on-going program that evolves according to the needs of the group."

The Community Specialist HIV/AIDS Nursing Service is a community-based, citywide service that provides support, care and advice to HIV positive adults at varying stages of their disease process.

If you would like to access more health advice or support about HIV, please contact Liverpool Community Health's HIV team on: 0151 285 2802 or contact Sahir House on: 0151 237 3989.

The group is open to anyone living with HIV and experiencing pain. The pain management group was a finalist in the Nursing Times awards 2013 and has had national interest.

For more information on any of our services please log on to:

[www.liverpoolcommunityhealth.nhs.uk](http://www.liverpoolcommunityhealth.nhs.uk)

## Sahir House—World AIDS Day 2014, Looking at 3 Decades of HIV on Merseyside

by Serena Cavanagh

We have learned a lot from looking back over the last 30 years of HIV on Merseyside, and the slogan - 'Knowledge is power' - fits very well with this year's World AIDS Day campaign.

Sahir House, Merseyside's HIV charity has been supporting the HIV community for three decades. World AIDS Day on 1<sup>st</sup> December is a major date in their diary and a fantastic opportunity to raise HIV awareness at a local level.

Paul, an HIV positive man living in Knowsley says: *"more HIV training is needed to raise awareness with any public service providers because in my experience there has been very little available in Knowsley. My own GP thought I was the first and only HIV positive person in his practice when I was diagnosed 5 years ago."*

Knowsley Public Health has recently funded Sahir House to deliver HIV awareness training to 60 front line staff starting in December.

Sahir House joined forces with Liverpool Community Health NHS Trust specialist HIV nursing Service and Armistead Centre during National HIV testing week, to encourage people to know their HIV status. Offering five extra satellite testing sites during this week to make testing even more accessible, including St Brides Church.

The week was aimed at increasing awareness and acceptability of HIV testing. Also, to encourage everyone who is sexually active and feels that they may be at risk of having contracted the virus to get tested in order to improve early diagnosis, treatment of HIV and reduce onward transmission.

Roger Phillips from Radio Merseyside supported the campaign by taking a HIV test and shared this with his listeners, from his blood being taken to receiving his test result on World AIDS Day.

Liverpool Wavertree MP and Shadow Public Health Minister **Luciana Berger** met with Sahir House to record a message of support. As well as Luciana's message Peter Tatchell also had recorded a message of support and both were shown at St. Georges Hall. The event, which was held on the evening of December 1<sup>st</sup> hosted by Sahir House and Armistead, was attended by over 350 guests. Guest speakers included The Lord Mayor of Liverpool, Erica Kemp, Merseyside Police Detective Constable Tracy O'Hara, Lynsey Jones and a member of the Armistead youth group. The *Now+then* short film was introduced by one of the film participants who spoke about why she felt it was important to be so open about her HIV status. The film can also be seen here <http://sahir.org.uk/nowandthen/film/>.



**Other World AIDS Day events included:**

Red Ribbon cake sales, pupils wearing red to school day, films at FACT, fundraising collections at a wide variety

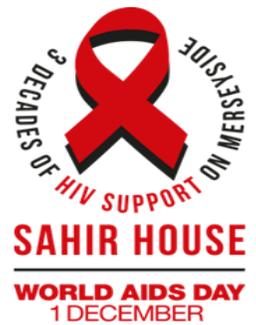
of venues and events, bag packing, red ribbons on churches, hospital corridors, window displays, costa coffee cups and 1000's of red ribbons being given out to the general public.



**The Poet with the Virus goes Viral this World AIDS Day**

HIV positive poet Cate Jacobs launched *'Climbing Mountains in the Dark'* a collection of poetry that follows her journey with HIV over the past 20 years. Cate, a Sahir House volunteer of 22 years, diagnosed HIV positive says *"people often say to me, I didn't expect it to be someone like you who has HIV. Being a public face of HIV shows it can be somebody just like you"*. Cate reminds us that we all have a HIV status; HIV positive, HIV negative, Untested. Cath Turner, Sahir House Development Manager says: *"Cate's poems have helped highlight the issues faced by people living with HIV. This will be an incredibly valuable resource tool in the furthering of HIV education and the training of health & social care professionals"*.

A full World AIDS day report will soon be available here [www.sahir.org.uk](http://www.sahir.org.uk).



## Sexual & Reproductive Health News & Outputs

Deborah Harris



Public Health  
England

### HIV in the United Kingdom: 2014

PHE published its report on 'HIV in the United Kingdom: 2014' on 19 November 2014, in advance of **National HIV Testing Week**. The report shows that nearly 110,000 people are now living with HIV in the UK. Around a quarter of these (26,100) are unaware of their infection and at risk of passing on the virus to others through unprotected sex. Encouragingly, the proportion of people diagnosed with a late stage of HIV infection fell from 57% in 2004 to 42% in 2013. The full report is available [here](#).

### GRASP 2013 report

The most recent GRASP (*Gonococcal Resistance to Antimicrobials Surveillance Programme*) Annual Report was published on 30 October 2014. The ongoing emergence of resistance to antimicrobials used to treat gonorrhoea is a global public health concern, as the ability of gonorrhoea to successively develop resistance to different antimicrobials has hampered control efforts and puts it at risk of becoming untreatable. PHE has twice provided data which directly influenced changes in treatment guidelines; the current treatment strategy has been to adopt a more aggressive approach of dual therapy with injectable ceftriaxone and oral azithromycin. The report is available [here](#).

### Sexual and reproductive health profiles: tool updates

The **Sexual and Reproductive Health Profiles** have been developed by PHE to support local authorities, public health leads and other interested parties to monitor the sexual and reproductive health of their populations and the contribution of local public health related systems. The profiles are presented as interactive maps, charts and tables that provide a snapshot of sexual and reproductive health across a range of topics including teenage pregnancy, abortions, contraception, HIV, sexually transmitted infections and

sexual offences. Wider influences on sexual health and teenage conceptions, such as alcohol use, education and deprivation level, are also included. The full list of completed and scheduled updates, including the most recent from 19 November 2014, can be found [here](#).

### National Chlamydia Screening Programme: audit report on turnaround times

This report, published on 26 November 2014, contains the result of the national audit on turnaround times within the National Chlamydia Screening Programme (NCSP). It was undertaken as part of the NCSP's quality assurance framework for 2014 to 2015, which measures against the NCSP standards. Consistent, high-quality practice across all screening venues is fundamental to the success of the NCSP in preventing and controlling chlamydia infection. The audit measured whether young people receive their test result within ten working days, and, if positive, whether they receive treatment within six working weeks. The report provides the results and contains comparative data as well as recommendations to help improve turnaround times. The report is available [here](#).

### Towards achieving the chlamydia detection rate: considerations for commissioning

In this guidance, published on 11 November 2014, the NCSP outlines ways for local authorities to improve the effectiveness and value-for-money of chlamydia screening of their local populations of 15 to 24 year olds. It suggests a number of activities to support local authority efforts towards achieving the Department of Health recommended chlamydia detection rate of 2,300 chlamydia diagnoses per 100,000 15 to 24 year olds; a Health Protection indicator within the Public Health Outcomes Framework. The report can be found [here](#).

### Chlamydia: integrating screening into primary care and sexual health services

This guidance from the NCSP was published on 11 November 2014 and looks at ways to develop integrated chlamydia screening provision locally. It sets out the benefits of integrating chlamydia screening into existing primary care or sexual health services, examining the associated issues and suggesting activities that may help with the process. The full report is available [here](#).

### Guidance for commissioning chlamydia screening in general practice and community pharmacies

This NCSP guidance for commissioners and service providers supports the commissioning of high quality chlamydia screening services in general practice and community pharmacies. Published on 11 November, the guidance can be adapted to suit local circumstances and provides suggested text that commissioners may wish to include in their contracts with providers of chlamydia screening. The report can be found [here](#).

### Public Health England sponsors sexual health award

PHE is delighted to announce its sponsorship of a new award for best practice in **whole system commissioning**, to be presented at **Brook** and **FPA's** Annual Sexual Health Awards 2015. We are encouraging those who work in sexual health, reproductive health and HIV (SHRHH) to nominate colleagues demonstrating best practice. Best Practice in Whole System Commissioning will join the eight other prestigious awards which celebrate best practice in SHRHH in England at the annual Brook event.

## HIV & AIDS in the North West of England 2013

Harris J, Lincoln A, Whitfield M, McVeigh J  
by Ann Lincoln



This November, the North West HIV/AIDS Monitoring Unit at the Centre for Public Health produced its eighteenth annual report on HIV & AIDS in the north west of England. In 2013, 7,625 HIV positive individuals accessed treatment and care from statutory treatment centres in the north west of England, the highest level to date and representing a 4% increase on the number reported in the preceding year (7,329 individuals). Overall prevalence in the north west of England has also increased to 162 per 100,000 population (compared with 156 per 100,000 population in 2012). Three local authorities in the region have an adult prevalence of over two per 1,000 population, they are Manchester, Salford and Blackpool. At this prevalence the British HIV Association recommend routine testing for all medical admissions and new registrations at general practices.

There were 769 new cases reported in 2013, this represented a slight decrease 0.4% from 2012 (772 new cases). New cases were classed as people who were new to the database in 2013, were not seen at a statutory treatment centre in the north west of England since 1994 and included transfers from elsewhere in the country. New cases represented 10% of all cases; similar to that seen in 2011 and 2012 (11%). Interestingly young people aged 15-24 accounted for 14% of those new to services, the equivalent of two young people presenting to services each week. Just over half (52%) of all new cases seen were men who have sex with men (MSM) followed closely by heterosexual sex representing 39% of new cases. The number infected through other routes (injecting drug use, blood tissue and mother to child) remained fairly low. The largest proportion of HIV positive individuals presenting for care were categorised as asymptomatic (41%). However, all four deaths among new cases in 2013 were due to an AIDS-related illness and 8% of new cases were diagnosed with AIDS by the end of 2013. This emphasises the need for HIV positive individuals to seek treatment at an early stage so as to maximise the effectiveness of treatment and improve prognosis.

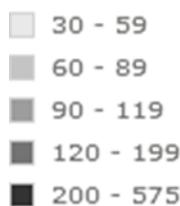
heterosexual sex representing 39% of new cases. The number infected through other routes (injecting drug use, blood tissue and mother to child) remained fairly low. The largest proportion of HIV positive individuals presenting for care were categorised as asymptomatic (41%). However, all four deaths among new cases in 2013 were due to an AIDS-related illness and 8% of new cases were diagnosed with AIDS by the end of 2013. This emphasises the need for HIV positive individuals to seek treatment at an early stage so as to maximise the effectiveness of treatment and improve prognosis.



**Figure 3.1: Number of cases of HIV per 100,000 population by local authority of residence, 2013**

*Crude rate based on the number of adult cases of HIV and AIDS (aged 15–59) residing in the north west of England and accessing the region’s treatment centres per 100,000 of the population*

Per 100,000 population



## HIV & AIDS in the North West of England 2013

continued

For more than half (52%) of all individuals who access treatment in the north west of England, sex between men (MSM) continues to be the principal mode of exposure. Of those whose infection route was known, 61% of Lancashire's and 57% of Cheshire's and Cumbria's HIV positive residents were infected via MSM compared with 43% of Merseyside's HIV positive residents. Those infected through heterosexual sex also increased from 15% in 1996 to 42% in 2013. Greater Manchester had the highest number of HIV positive individuals infected through injecting drug use (IDU) accounting for 68% of all residents of the north west of England infected by this route.

The global HIV situation is also addressed within the report and continues to influence the north west of England, with a third (33%) of all HIV cases exposed abroad and one in seven of these being contracted in sub-Saharan Africa.

The report contains data from eight community sector organisations and five social service departments across the north west. They continue to play a vital role in providing support to HIV positive individuals.

The full report also covers information on route of infection, stage of disease, ethnicity, infections abroad, residency status of individuals accessing statutory sector services, antiretroviral treatment and use of HIV services.

For the first time we have included case studies in our report. Over the past year the north west of England HIV data has been used to help plan and improve the lives of those individuals living with HIV. Included are the following case studies, HIV Screening in an Acute Medical Unit in Blackpool; the Liverpool Between the Sheets project; George House Trust referral pathway; HIV and Pain Management and the Halve it Campaign.

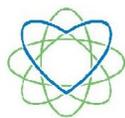
This article is a summary of the latest HIV & AIDS in the North West report. You can access a full copy here <http://www.cph.org.uk/expertise/sexual-health/>.

Additional data by county and LA can also be found here [www.cph.org.uk/hiv/](http://www.cph.org.uk/hiv/).

We continue to seek to produce a report that reflects the nature of HIV across the region. So if you have any comments or suggestions on ways we can improve the report please use the contact details below:

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THE SEXUAL HEALTH  
NETWORK  
GREATER MANCHESTER

### Greater Manchester Sexual Health Network Update

The next update from the Greater Manchester Sexual Health Network will be in the March (2015) issue of the bulletin.



## News and events

## Sexual Health Quarterly Bulletin

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### Shooting Up: infections among people who inject drugs in the UK

In November Public Health England released an update of their Shooting Up report, which describes the degree of infections among people who inject drugs (PWID) in the United Kingdom. The document can be accessed here <http://bit.ly/1qrltbo>

### Public Policy Exchange: Improving Responses to Rape and Sexual Assault: A New National Action Plan

This interactive seminar will take place on Tuesday 10th February 2015, in Central London. Register your place and obtain more details here <http://bit.ly/1FPSCJN>

### Brook Training

Brook offer a range of training courses for professionals working with young people, which includes the following; Sexual Behaviours Traffic Light Tool, Abortion: Decisions & Dilemmas and TEASE: Telling Everyone About Sexual Exploitation training. For more information please click here <http://bit.ly/1vQ5ZHp>

### National AIDS Trust (NAT) e-Learning for health and social care workers

NAT along with BHIVA (British HIV Association) have produced a training resource for those working in the health and social care sector. Further information about the tool can be found here <http://bit.ly/1y3sAOP>

### Prevention, Protection and Prosecution: Implementing a Zero Tolerance Response to Female Genital Mutilation (FGM)) 19th March 2015

An estimated 20,000 girls under the age of 15 are at risk of FGM in the UK each year. This conference will provide an opportunity to discuss ways to engage with schools, encourage communities and improve protection. For further information and registration visit: <http://bit.ly/1wgpbhs>.

### Sahir House

Climbing Mountains in the Dark is a collection of poetry that follows Cate Jacobs journey with HIV over the past 20 years. It is available as an E book from Amazon Kindle or here <http://bit.ly/1xkqOhd>. A percentage of the profits go to Sahir House, Merseyside's HIV charity.

### Public Health England; Work exposures to HIV, hepatitis B and hepatitis C still rising

PHE have recently released a new report warning of the risks to healthcare workers of exposure to bloodborne viruses, through occupational sharps injuries. The full report can be accessed here <http://bit.ly/1BPgu2w>.

