



# Sexual Health and Blood Borne Virus Programme Board Annual Report 2022/23

## Public Health and Health Policy

**Report Authors:** Yvonne Kerr, Strategic Programme Manager, Public Health and Health Policy; Steff Kaye, Assistant Programme Manager Sexual Health and Blood Borne Viruses

**Date:** 5<sup>th</sup> October 2023

**Acknowledgments:** With thanks to contributions from colleagues, including those in Lothian Analytical Services, who supported the preparation of this report.

**For further information, contact:** [loth.directorofpublichealth@nhs.scot](mailto:loth.directorofpublichealth@nhs.scot)

# Contents

---

Executive Summary .....3

Introduction .....6

Sexual Wellbeing .....7

Access to Services .....10

Improving Outcomes for Young People .....13

Links to other strategies .....15

Governance, Accountability and Service Usage Data .....22

Conclusion .....26

# Executive Summary

---

This report provides information on workstreams and service provision delivered by key partners of the NHS Lothian Sexual Health and Blood Borne Virus Programme Board, including Public Health, Lothian Sexual and Reproductive Health Services and others. It demonstrates the breadth of work being undertaken for both the general population and for those who require more support and targeting. NHS Lothian PHHP Directorate is committed to working with partners to tackle the underlying causes and structural determinants of health that can impact on the likelihood of someone experiencing poor outcomes in relation to their sexual health and wellbeing, including blood borne virus status.

Promoting good sexual wellbeing, particularly for young people, is essential to ensure they go on to achieve good sexual health. Public Health has continued to deliver the Healthy Respect service, delivering information, education and services, with a focus on young people aged 13-18. A key focus in 2022/23 was the development of a new Healthy Respect website, which was launched in May 2023, and work is now ongoing to develop an Easier to Understand (ETU) version of the website to support young people with learning disabilities and additional support needs. The three-year contracts for our commissioned services with LGBT Youth Scotland, LGBT Health and Wellbeing and Waverley Care have continued, including work to support sexual wellbeing, and work is currently underway to recommission support for these populations, with new contracts due to start in April 2024.

Public Health continues to improve access to services, including by part-funding an Inclusion Health post. The post holder manages the ROAM outreach service to engage gay and bisexual men and all men who have sex with men (GBMSM) as well as a wider inclusion health remit. This includes developing outreach delivery models for other populations; supporting workforce development for those working with vulnerable adults, and improving pathways into sexual health services. The Locality Services Team have worked to re-establish services delivered in settings outside of the central Edinburgh Chalmer's hub, following the pandemic. A new Locality Services Action Plan for 2022-24 includes actions to increase outreach services and make existing services more accessible for inclusion health populations. An internal evidence review conducted in 2022/23 identified key populations likely to require additional support to access sexual health services, and work is now ongoing to look at how recommendations from the review are implemented.

Young people's attendance at sexual health services has significantly declined since the pandemic, and Healthy Respect worked closely with the Healthy Respect + clinical service to support people's attendance at services, and young people's access to condoms by post, the latter of which was scaled up during the pandemic. This is particularly important in light of the near-doubling of rates of gonorrhoea that has been seen in young people aged under 25 since pre-pandemic levels. Work is now ongoing, to promote Public Health Scotland's new campaign on the increase in Sexually Transmitted Infections, as well as to improve access to testing for young people. Healthy Respect continue to deliver training and support to colleagues in education to support the reinstatement and effective delivery of Relationships, Sexual Health and Parenthood (RSHP) education which suffered due to

COVID-related school closures and curriculum recovery pressures.

Public Health continues to coordinate work to meet the national target for the elimination of Hepatitis C in Scotland by 2025. In 2022/23, NHS Lothian set a notional target for Hepatitis C treatment initiation of 315, however only 204 patients were successfully initiated on treatment. The target was notional due to a lack of up-to-date prevalence figures meaning targets could not be broken down to Board level. The previous prevalence rate of 14% was used to provide some level of focus. In 2022/23 service delivery was impacted by staff vacancies, service re-organisation and technical issues with testing, all of which impaired services' ability to test people at risk and refer them on for treatment. The Hepatitis C Managed Care Network has continued to work with the wide range of NHS and community and voluntary sector services who see people at risk of BBVs, helping them to identify the barriers to offering testing and to look at ways to overcome these. NHS Lothian's treatment initiation targets for 2023/4 and 2023/5 has been set at 350 each year, so further work is required.

The numbers of individuals newly diagnosed with HIV in Lothian in 2022 was low (under 25) and remains so for the first part of 2023. It appears that the decline of first ever HIV diagnoses observed in 2020 and 2021 has continued despite a recovery in the number of tests performed. However a significantly larger number (over 80) of individuals with existing HIV diagnoses transferred into Lothian services. Our commissioned service delivered by Waverley Care continues to support those living with HIV, as well as supporting GBMSM and other groups experiencing an increased prevalence of HIV with awareness raising and access to testing, complementing the ROAM service which continues to do outreach work with GBMSM, including promoting access to the Pre-Exposure Prophylaxis (PrEP) service delivered by LSRHS. Edinburgh signed up as a Fast Track City in 2022, part a global partnership to end HIV transmission, HIV-related deaths, and HIV stigma by 2030. A stakeholder workshop to launch this work is planned for late 2023, and work will be ongoing in 2023/24 to support awareness raising, access to HIV testing, and reducing HIV stigma to support the national implementation of the HIV Transmission Elimination proposal published by Scottish Government in December 2022.

The provision of safe, effective and timely access to contraception and abortion services, as well as to menopause care, are essential to support women's health and wellbeing, and it is recognised that access to these services was disrupted during the pandemic. Waiting times are now reduced, and work has been ongoing to support increased access to services in ways that best meet women's needs. Routine and complex LARC appointments are now fully restored and exceed pre-pandemic levels, but there continues to be high demand for LARC which is unmet at present. The demand for abortion care has also increased which has created challenges for services. Work is ongoing to explore the potential for pharmacies to play a greater role in meeting women's health needs, as well as to ensure joined up working between Lothian's SHBBV Programme Board and wider Women's Health work.

The SHBBV Programme Board, chaired by Public Health, continues to provide an oversight role, bringing together those working on SHBBV to discuss opportunities for collaboration to improve population health and reduce health inequalities. Following the publication of the final version of the Scottish Government SHBBV Action Plan (2023-2026) the Programme

Board Plans to review its Terms of Reference, to ensure that its remit, membership and subgroup structure are appropriate to support the delivery of the national priorities. In 2022/23 there has been increasing recognition of the need to better understand not just how many individuals services are reaching, but which population groups our services are reaching. Work is now ongoing, with support from Lothian Analytical Services, to address this, to enable us to provide a more equitable service that will support a reduction in health inequalities. With regard to reporting, we are aware that there is overlap between some of the content contained here and that which is covered in the Lothian Sexual and Reproductive Health Services (LSRHS) biennial report. We propose combining these reports into one, thereby bringing a health inequalities lens to all LSRHS reporting.

# Introduction

---

The 2022/23 annual report of NHS Lothian's Sexual Health and Blood-Borne Virus (SHBBV) Programme Board, provides an overview of activities to date and future areas of focus. This report focuses on the delivery of SHBBV work to improve population health and reduce health inequalities, and is complementary to the [Lothian Sexual and Reproductive Health Service Biennial Performance Report](#).

The report focuses on work governed and funded by the Public Health and Health Policy Directorate as well as presenting information on work undertaken by key partners to which public health staff provide advice and support. The report is structured using the themes proposed in the draft Scottish Government SHBBV Action Plan (2023-2026), which is due to be published in October 2023:

- Sexual wellbeing
- Access to services
- Improving outcomes for young people
- Links to other national plans:
  - [Hepatitis C Action Plan](#)
  - [HIV Transmission Elimination Proposal](#)
  - [Women's Health Plan](#)
- Governance, accountability, and data

# Sexual Wellbeing

---

## 3.1 Healthy Respect

Healthy Respect supports the sexual health and wellbeing of young people from primary school age up to 18 years. Work is delivered through three programmes of activity – education and training, community-based services and access to up-to-date information for both young people and the workforce who support them.

Nineteen training courses were delivered in 2022/23 to 484 attendees, to increase participants' knowledge and confidence to support young people's sexual health and wellbeing, and to support practitioners to deliver the Relationships, Sexual Health and Parenthood (RSHP) curriculum. Training delivery will continue into 2023/24, with the addition of a new training offer for primary school teachers to supplement the existing Primary RSHP Training for Trainers. Healthy Respect will continue to work with c:card to deliver educational condom resource boxes to secondary schools in Lothian, accompanied by links to RSHP session plans and local service information to support signposting.

In 2022 Healthy Respect participated in the development and launch of Awkward Moments, a suite of films demonstrating positive messages around consent. Co-produced with young people, it was launched via social media and is available as an online educational resource. Healthy Respect developed and launched, in May 2023, a new website which supports young people's sexual wellbeing by providing accessible information about sexual health, relationships, and local services. In November 2023 the team will launch our Easier to Understand (ETU) website content, using an easy-read format including images and simple text. This will make sexual health information accessible for people with learning disabilities and additional support needs, a group known to be at risk of poor sexual health outcomes. In addition, Healthy Respect will continue to lead a new project to develop a national Image Bank to support the development of easy-read content.

In 2022/23 Healthy Respect school and community-based services (delivered by external partners and supported by Healthy Respect) continued to re-open following covid-related closures, offering accessible early intervention services. The addition of the Priority Access mobile number allows Healthy Respect partners to support the fast-tracking of young people into clinical services, via phone call to the senior nurse in Chalmers Centre. In 2023/24 Healthy Respect will re-launch Postal Testing Kits (PTKs) for chlamydia and gonorrhoea and will support the embedding of this resource alongside safer sex messaging, in the context of the increase in gonorrhoea infection among under 25s in Scotland.

## 1.2 Inclusion Health

The Lothian Sexual and Reproductive Health Locality Services Team developed a new action plan for 2022-24. A key priority was to increase outreach services and make services more accessible for 'inclusion health', or vulnerable populations. A SHBBV bid was submitted to Scottish Government for the *Outreach Inclusion Project* (to fund an outreach

bus and staff). Unfortunately, this was unsuccessful therefore expanded outreach and support for these populations continues to be a challenge into next year. A collaboration between the Locality Services Team, Healthy Respect and Healthy Respect+ is also progressing in East Lothian, looking at improved access to services for young people.

Since January 2022, a monthly STI testing clinic to take place at the University of Edinburgh, providing testing to the student population. This clinic has been supported by the ROAM service, which primarily focuses on improving the sexual health and wellbeing of all men who have sex with men. ROAM also targets some of the harder to reach populations alongside this. The re-launched No Talk Testing service in the Chalmers Centre will further support access to testing in 2023-24.

In 2023/24 health promotion will commence at a monthly event for people with learning disabilities, and university and college-based testing will continue and increase across Lothian, particularly in conjunction with gonorrhoea prevention work. Ongoing communications work will continue including further work to determine if a Chalmers-wide network list can be developed, as well as improved referral pathways and a training programme.

### **1.3 ROAM**

ROAM, NHS Lothians service for gay and bisexual men and all men who have sex with men, continued their collaborative work with Waverley Care, providing monthly outreach as well as other opportunistic health promotion events like World AIDS Day. ROAM also collaborated with Screening and Early Detection of Cancer Team to support initial assessments for head and neck cancers linked to the Human Papilloma Virus. A Chemsex resource (as well as other resources) were developed for promotion and wellbeing. In June 2023, ROAM sponsored Edinburgh Pride to raise awareness of the ROAM service.

A review of ROAM one-to-one provision will take place in 2023/24 to ensure the model of delivery is fit for purpose and meeting the needs of service users. Access to other appropriate services will be considered as part of this.

### **3.4 Commissioned Services**

NHS Lothian currently commission partners to provide services to support sexual health and wellbeing in 4 separate lots:

- Lot 1 Support to people living with HIV (2020-2023 and renewed with updated specification in 2023 which comes to an end March 2025)
- Lot 2 Sexual health and wellbeing of Gay and Bisexual men, and all men who have sex with men (GBMSM) (2020-2024)
- Lot 3 Sexual health and wellbeing of LGBT (adults) (2020-2024)
- Lot 4 Sexual health and wellbeing of LGBT (13-18 year olds) (2020-2024)

For Lot 1: Support to people living with HIV, Waverley Care are contracted to deliver: information and signposting to people in Lothian living with HIV; social and emotional support



(including one to one intensive support as required); targeted awareness raising to African communities; and facilitating peer and group support opportunities. In 2022-2023 Waverley Care supported 110 active service users. 95 service users received one-to-one support with an average of 9 interventions per person. 36 group sessions were delivered.

For Lot 2: Sexual health and wellbeing of GBMSM, Waverley Care are contracted to deliver: community-based HIV and syphilis testing to GBMSM and awareness-raising of other SHBBV testing routes in Lothian; support for GBMSM's wellbeing by providing one to one support interventions and supporting access to services to support wider health needs. In 2022-2023 Waverley Care provided 109 point of care tests for HIV and syphilis. One-to-one support was provided to 31 individuals with an average 6 sessions per person. Waverley Care engaged with 226 people on social apps.

For Lot 3: Sexual health and wellbeing of LGBT adults, LGBT Health and Wellbeing are contracted to support the wellbeing of LGBT adults by providing: a telephone and online messaging advice and support service; specialist counselling for LGBT adults; specialist support service for transgender adults, including one to one interventions and social/group opportunities, as well as support to access services. In 2022-2023 LGBT Health and Wellbeing had 177 helpline engagements. They provided weekly counselling sessions for 29 people with an average 12 sessions per person. 97 Trans individuals received one-to-one support and there were 197 engagements in group and social activities through the Transgender Support Programme.

For Lot 4: Sexual health and wellbeing of LGBT young people, LGBT Youth Scotland are contracted to support LGBT young people's wellbeing by providing: youth groups, including dedicated groups for trans young people; one to one support and online support; workshops to support young people's health and wellbeing; support to access services; information resources; support for educational establishments, and support and training for the wider young people's workforce in Lothian. In 2023-2023 LGBT Youth Scotland delivered 140 youth sessions resulting in 1,910 contacts; and 397 one-to-one sessions.

Work is ongoing in 2023 to reprocur sexual health and wellbeing support for the three population groups currently supported via lots 2, 3 and 4, with new contracts due to be in place from April 2024.

# Access to Services

---

## 1.4 C:card

C:card is a free condom scheme for people aged over 13. Post-COVID, an audit of all c:card points was completed. Each of the 81 c:card points that were operating prior to the pandemic were contacted/visited to assess if they were still able to provide c:card. Around 1 in 4 were no longer able to provide the service due to various factors including change to home working, loss of office space, increased security preventing easy access and loss of staff/funding. However the condoms by post service goes from strength to strength with over 10,000 people using this annually in 2022/23.

In the coming year, the c:card service is working with c:card providers to manage any increase in demand as a result of the national campaign to address the increase in STIs, including gonorrhoea. We will be encouraging new points to set up within geographical gaps identified. There will be increased focus on budget management given product price increases plus new requirement for condom budget to cover postal costs of condoms by post service.

## 1.5 ROAM

ROAM, service for gay and bisexual men and all men who have sex with men have provided a variety of outreach sexual health services including STI testing, vaccinations, Pre-Exposure Prophylaxis for HIV (PrEP) and health promotion across various locations including an outreach testing bus, locality-based clinics and LGBT+ friendly locations including pubs, cafes and saunas. These services aim to reach GBMSM who would not otherwise access services in a mainstream setting. Services were expanded this year with increased hours at Steamworks sauna and an additional drop-in clinic at Pennywell on Friday afternoons. ROAM utilise social media to promote services and provide support to GBMSM. ROAM was able to support Chalmers with the Mpox outbreak through social media and clinical support. In March 2023 ROAM were approached by RefHelp to develop a short film to promote the service. Subsequently we have revised the GUM-related SRH RefHelp pages and are in the process of filming the short film.

In addition to the ROAM outreach and locality work, the Chalmers Centre reinstated its walk-in service for GBMSM service in March 2023, this was re-named the 'GB+ Clinic'. This is held weekly on Wednesday evenings and is very well attended, with >40 patients a session. A pilot feedback questionnaire has generally returned very positive views from patients who have accessed the service. ROAM was also a finalist for the Proud Scotland Award for Public Services in 2023.

Plans for 2023/24 include increased health promotion via Twitter as well as an e-poster at BASHH. Locality-based clinics have expanded to East and West Lothian due to the loss of the outreach bus service in 2023. Additional services at CC Blooms and Kafe Kweer have also commenced. Service user evaluation will be done in 2023.

## **1.6 Locality Services**

Efforts to re-establish Locality Services have continued, at the same time as strengthening links with partner organisations (BBV, Addictions and community and voluntary sector organisations). We are committed to ensure staffing levels for optimal service delivery with existing resources. A successful partnership development event was run with key stakeholders in October 2022.

The Howden service in West Lothian continues to deliver more complex levels of care, with an established HIV clinic (once a month) and the provision of complex contraception and menopause care. In addition, we have:

- Established an online booking system for IUD appointments
- Reopened a drop-in service for young people on Friday afternoon
- Increased capacity for STI testing and vaccinations (mainly to support provision of PrEP)
- Created a new nurse clinic for the management of gonorrhoea infections.

The Pennywell clinic reopened in April 2023 and there has been a considerable increase (35%) in overall attendances since. It is worth noting this figure includes the Healthy Respect + clinical service attendees as well as the adult service.

At strategic level, the Locality Services Team is revisiting its Terms of Reference and membership of the group to improve the provision of SRH services in local areas, working in partnership with others to facilitate and prioritise access to those most in need.

## **1.7 WISHES**

The WISHES service provides support to vulnerable women. Following interruption due to the pandemic, a weekly drop-in service was re-established at Spittal Street in partnership with third sector and harm reduction services. A fortnightly sauna outreach has also continued. Following a gap, the WISHES outreach nurse is back in post and strengthening links with partner agencies across Lothian.

## **1.8 Inclusion Health Nurses**

There are seven Inclusion Health Nurses (Nurses from other backgrounds trained in sexual health delivery) linked in with Chalmers and working across Lothian to provide SRH services within their own settings. These settings include:

- East Lothian Substance Use Service
- Edinburgh Access Practice
- No. 11 Dalkeith (x2)
- Willow Service
- Addiction treatment & recovery care (South East Team)
- Community Addictions Service (West Lothian)

## 1.9 Self-Sampling Kits (SSKs) pilot

Lothian Sexual & Reproductive Health Services (LSRHS) piloted a new national project for SSKs that allow those who are asymptomatic to test for sexually transmitted infections (STIs) from home. The pathway builds on a system already developed and implemented in Lothian, which allows patients to order a testing kit online and have the SSK posted to their home address. The patient completes the kit at home, posts it to the laboratory in the pre-paid return box, which fits in any Royal Mail post box, and accesses their results a few days later using the telephone results system. The SSKs screen for chlamydia and gonorrhoea using a swab or urine, and for HIV and syphilis using a self-taken blood sample from their finger. Since the introduction of software enhancements to the National sexual health IT system (NaSH) by the supplier, the user-facing and back-end pathways have significantly improved the usability of the home sampling kits for patients and staff.

Patients using the LSRHS website are directed to an NHS Scotland central site operated by Excelicare who provide the NaSH electronic patient management system. Patients are then met with a website that has had significant user-involvement throughout creation and design and are asked relevant questions to ensure the testing kit is suitable for them, to screen for potential vulnerabilities and to provide details on what tests they need and where to send the testing kit. Those under 16 are not able to order a testing kit and are directed to LSRHS Healthy Respect + drop-in services. Those 16-18 are asked additional safeguarding questions and offered a clinician callback should the patient wish. All patients over 16 are asked whether they have had unprotected sex in last 3-5 days to screen for need for PEPSE or emergency contraception. At the end of the order the request is sent through to LSRHS to be fulfilled. These kits are very popular and are fully allocated shortly after being made available each weekday.

This system completely changed how LSRHS were processing their home sampling kits (HSK), which were postal kits created to support STI screening during covid. With processes already in place for HSKs, LSRHS were ideal candidates to trial the SSK. The SSK system allows the team to easily identify workload, priorities, kits required and make up the required kit. This process has significantly improved the efficiency of the process in preparing the kits compared to previous practice. The next steps currently underway are to automate some of the results functionality to further streamline the process for staff managing results. The successful pilot will inform the roll-out of a national implementation of the system to other Health Boards

Ongoing challenges include the costs associated with the kits, materials and postage/ packaging costs. This limits the number of kits that can be allocated on a daily basis. Work is underway to explore local and national options to increase capacity through additional resources and procurement savings. Technical issues including challenges in reliably obtaining satisfactory blood samples for testing are being addressed, also at local and national level, with significant progress made. Further work is required to establish how the potential for SSKs to improve access STI testing for asymptomatic individuals can be effectively realized in Lothian and across Scotland.

# Improving Outcomes for Young People

---

## 1.10 Healthy Respect

Young people's use of sexual health services has declined since the Covid19 pandemic, a trend observed locally and nationally. Healthy Respect aim to support young people's attendance at sexual health services through:

- Raising awareness of sexual health services: via online promotion and accessible 'find a service' website tool; by cascading service posters in schools and youth organisations; by developing and cascading a young people's service pathway to support practitioners in signposting/referrals, including a Priority Nurse mobile number for direct referrals to clinical HR+ service; by providing services information as part of Healthy Respect training content.
- Facilitating and developing service provision: by providing training, support and resources to facilitate the delivery of early intervention sexual health services to young people in school and community settings. At the end of Easter term 2023 there were 16 schools in Lothian hosting Healthy Respect services, and one community-based Healthy Respect drop-in. Other community-based partners offer ad hoc Healthy Respect services, including conversations/signposting around sexual health and wellbeing, pregnancy testing and free condoms (in partnership with c:card).

In 2023/24 Healthy Respect will continue to promote young people's sexual health services using online platforms, posters and via training and attendance/presentations at partnership groups across Lothian. The planned opening of new West Lothian Council youth work provision in Livingston in December 2023 presents an exciting opportunity to embed a clinical sexual health service as part of a new, holistic youth work provision. We will continue to engage with stakeholders in East Lothian in light of the continued low attendance at Tranent HR+ services. The development of the Learning Disability Image Bank and the launch of the ETU section of the Healthy Respect website will make information about sexual health and sexual health services accessible to groups of young people who were previously overlooked.

## 1.11 Healthy Respect +

Healthy Respect + (HR+) provides clinical services for young people aged 13-18. The central young people's clinical service at the Chalmers Centre reinstated a full drop-in service in January 2022 after a period of appointment-only services. Healthy Respect + (HR+) continue to deliver locality clinics for young people 13-18:

- Croft Street HR+ in Midlothian

- Tranent HR+ restarted in March 2023 with ongoing work with partner services in East Lothian to support young people's engagement, including exploring option of changing location
- Howden HR+ in West Lothian
- Nursing/youth work outreach work (via the outreach bus) in Pilton – It was not possible to maintain this service due to staffing capacity, however it demonstrated a clear need for services to return to this area, and Pennywell HR+ restarted in February 2023.

Despite ongoing promotion and awareness raising, attendance across young people's clinical sexual health services remains well below pre-COVID levels.

# Links to other strategies

---

## 6.1 HCV Elimination

The Scottish Government has a commitment to eliminate hepatitis C in Scotland by 2024. Achievement of this goal requires ambitious targets for the diagnosis of and treatment for people infected with the virus which will be challenging for NHS Lothian to meet.

In 2022/23 services continued to deal with recruitment challenges, effects of service re-organisation and technical issues that impaired their ability to test people at risk and refer them on for treatment. The Hepatitis C Managed Care Network (MCN) has continued to work with the wide range of NHS and third sector services who see people at risk of BBV infections, helping them to identify the barriers to offering testing and to look at ways to overcome these. Harm reduction work, in conjunction with substance use services to minimize the transmission of all BBVs, is ongoing.

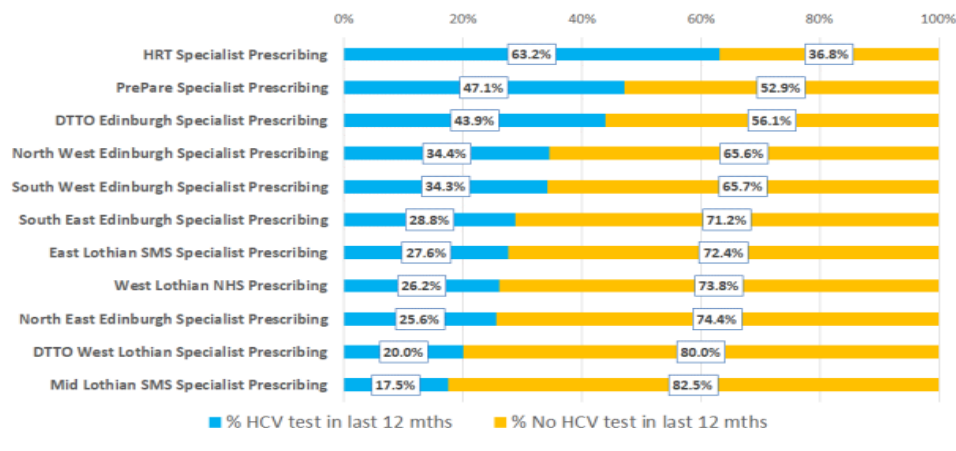
Services for people who have problematic drug and alcohol use see the majority of people at risk of these infections. There is no longer a single service across Lothian and each locality faces different issues in testing their clients. The MCN has worked with services to look at their current levels of testing and we now produce a quarterly report on the number of people on treatment tested in the last 12 months for each locality. This is a key indicator in the new national Medication Assisted Treatment (MAT) Standards for these services and we share good practice from other areas through these reports.

Other areas that the MCN has worked on to improve testing rates in these services include:

- Close work with the regional virus laboratory to improve long turn-around times for dried blood spot (DBS) BBV tests used by many workers for diagnosis. The delays in getting results were a deterrent to testing for both workers and clients.
- Improving recognition in staff that undertaking BBV testing is an integral part of their harm reduction work with a client through training and awareness raising.
- Supporting services with poor access to physical premises and encouraging return to face-to-face appointments where testing can be undertaken.
- Developing DBS self-testing kits that can be given or sent to clients to use at home and return by post.

Improving testing rates in these services is the major challenge for NHS Lothian to improve our diagnosis rates for hepatitis C and increase the number of people referred in for treatment. The graph below shows testing data from Jan to March 2023.

% of patients prescribed Opiate Substitution Therapy (OST) by NHS Lothian Specialist Services in the latest quarter who have been HCV tested in the last 12 months.  
By Prescribing team



At the same time the MCN has worked on other initiatives to reach at risk people who are not in traditional services

- A CEPHEID portable analyser has been purchased that can give a hepatitis C diagnosis with an hour. This is being used by the Community BBV Team in various settings including police custody suites, community outreach clinics and hostels for the homeless.
- Work with prison healthcare teams to increase their level of testing and ongoing input from the Community BBV Team to provide testing in recognition of the severe staffing issues that are an ongoing issue for the prison health teams.

Treatment capacity is not felt to be a significant issue in NHS Lothian and the MCN has worked with the teams at the RIE and at the WGH to widen the sources of referrals for treatment, including by:

- Development of outreach testing into medical and surgical wards at the RIE. The hepatitis specialist nurses are offering awareness raising about BBV risk in these wards, identifying individual patients at risk and requesting testing by the teams treating them and following up on positive results.
- All positive BBV tests taken in hospital settings in Lothian are now sent to the BBV treatment teams as well as the requesting team to help ensure that these people are referred in for treatment or have treatment discussed whilst they are an inpatient.
- Ongoing work of the Outreach team which gets all positive results from patients in Lothian and reaches out to them if they have not been treated one year after diagnosis. This work was interrupted by loss of a staff member at the end of 2022 but the post is once again filled and work is continuing.

At the end of 2022/23, 204 people had been initiated on treatment for hepatitis in NHS Lothian. As stated earlier in this report, a lack of up-to-date epidemiological evidence meant that a notional treatment target was set for 2022/23 using previous prevalence rates. This information is now available and a formal target of 350 people to be initiated onto treatment



in Lothian in 2023/24 has now been set by the national Hep C team. It is evident that we are falling short currently. The MCN will continue to support services who should be offering testing and will look at new initiatives to increase new diagnoses. These include the exploration of a pilot of opt-out testing in Emergency Departments, following on from research in England showing how this can successfully identify people with undiagnosed infections.

## **6.2 HIV Transmission Elimination**

In 2022 there were nine new HIV diagnoses who started accessing their care from LRSR, and 13 who started accessing care from the Regional Infectious Diseases Unit (RIDU). Fifty-four individuals transferred their care to LRSR and 29 transferred care to RIDU, from other Scottish, UK and international HIV services. A further four newly diagnosed individuals from Lothian started accessing LRSR HIV care in the first six months of 2023 with seven starting accessing care at RIDU, while 21 individuals transferred their care into the LRSR service and 16 transferred into RIDU from other services over this same time-period, meaning a total of 48 additional individuals accessing care in Lothian. While the number of new diagnoses have been declining since around 2015, it is possible that there will be an increase in numbers of new diagnoses over the coming months, if opt-out testing goes ahead.

LRSR HIV patients are receiving at least 6-monthly reviews again in the post COVID period, though patients who only require annual blood tests are now able to opt for remote consultations for some of their appointments. The availability of remote consultations has improved patient access and reduced DNA numbers. LRSR has started delivering injectable ARV therapy for suitable patients; we currently have 6 patients accessing this 2-monthly injection therapy. The majority of RIDU HIV patients are attending 6 monthly appointments for bloods and a face-to-face consultation with a consultant, alternating with an HIV CNS annual review appointment. There are 108 people living with HIV who feel they are stable and only attend the nurse-led service within RIDU.

HIV testing numbers in LRSRHS have recovered and exceeded pre-COVID levels. As described separately, Lothian is the test site for the national SSK project, which includes HIV among the tests offered. From May, Chalmers has also relaunched a No Talk Testing (NTT) service for asymptomatic patients wishing to access STI screening, including HIV testing. This service is also bookable online.

The PrEP service delivered by LRSRHS has increased capacity through efficiency changes and enhanced staffing funded by the Edinburgh Health and Social Care Partnership (HSCP). The waiting list for PrEP has been cleared and work is underway to ensure equity of PrEP access to populations other than GBMSM, in line with revised national prescribing guidance which replaces the previous narrow eligibility criteria. The PrEP service (PrEP is currently only prescribable through specialist sexual health services) continues to expand, with a significant increase in demand post-COVID. The LRSR PrEP cohort has expanded to around 1500 patients, more than three times the pre-COVID number. On average, we now provide >250 PrEP consultations a week, compared to <25 a week pre-COVID. PrEP is prescribed to many more patients with complex pre-existing medical needs, including those

with co-morbidities, polypharmacy or other vulnerabilities requiring increased frequency of monitoring. We now provide Descovy (Tenofovir alafenamide/ Emtricitabine) PrEP to patients as high risk of renal and bone toxicities from routine PrEP preparations. To ensure good medicines management (Descovy remains under patent and is much more costly than standard generic PrEP), all Descovy prescriptions are agreed at PrEP MDT, which is held every 2-months. We currently have 21 patients receiving Descovy PrEP.

With the formal replacement of existing eligibility criteria with Scottish PrEP suitability criteria at the start of 2023, and related advertising of PrEP to non-GBMSM population groups, it is likely that our PrEP patient cohort will continue to expand reflecting improved equity of access to HIV prevention. We have updated the LSRH website, posters, protocols and PGDs, to include the expanded eligibility criteria.

In the ROAM service, outreach testing services continue to be our main focus for reducing HIV transmission, however we have also provided Point Of Care Testing (POCT) training and supplied POCTs to several services including Waverley Care, in order to support access to HIV testing and PrEP to GBMSM who experience barriers to accessing mainstream services, and to groups other than GBMSM. The Let's Get PrEP'ed project continued throughout the year and will be evaluated in August 2023. ROAM provided 156 referrals for PrEP and completed 335 PrEP assessments over the year. ROAM contribute to Fast Track Cities meetings and planning of future activities.

## **6.3 Women's Health Plan**

### **6.3.1 Abortion Care**

Abortion in NHS Lothian is mainly self-referral via telephone to the centralised Lothian abortion referral service based at Chalmers. Consultations for abortion are delivered from 2 sites: Chalmers (80%) and women's services at St John Hospital (SJH) for those living in for west Lothian (20%). Consultations are usually by telephone, with further in person clinic appointment made for those requiring an ultrasound or needing further assessment.

In 2022, data from PHS shows a 19% increase in abortions in Scotland compared to 2021 in those aged between 16 and 34 years. In NHS Lothian, the corresponding figure was a 15.5% increase. There were 3048 abortions in NHS Lothian in 2022, 98% were medical (only 63 were surgical). The vast majority of abortions (81%) were early medical abortions performed at less than 12 weeks pregnancy at home.

Abortion rates for those living in the most deprived areas of Scotland are more than double that of those living in the least deprived areas. This pattern is also seen in NHS Lothian and rates were higher in West Lothian and Midlothian than in the City of Edinburgh. The rate (per 1000 women of reproductive age) of those self-reporting more than one abortion ever, was higher in NHS Lothian (6.4) than the Scottish average rate (6.2) in 2022.

The abortion service faced challenges with this significant increased workload and in trying to maintain access and achieve acceptable waiting times. Chalmers added additional regular unfunded clinics to try to mitigate this. A quality improvement project revealed that there

remain significantly longer waiting times for access to a consultation in SJH than in Chalmers.

The team from Chalmers/university of Edinburgh successfully led the Scottish Government commissioned national evaluation of Telemedicine early medical abortion which has been published online. Priorities for the year ahead will be to maintain good and equitable access given that level of demand for abortion in 2023 remains similar to the level seen in 2022.

### **6.3.2 Menopause care**

Public awareness of the significant challenges that menopause can present has increased enormously in recent years. This is important for the wellbeing of people in perimenopause and menopause however it has driven an exponential increase in requests to Primary Care for management of symptoms that may relate to menopause. Some of the recent media coverage has set unrealistic expectations as to what hormone replacement therapy (HRT) can achieve for symptoms experienced in menopause and the safe use of HRT. Widespread private provision of unlicensed HRT regimens has resulted in huge patient demand for NHS provision of non-standard HRT regimens that are unsupported by an evidence base for safety and effectiveness or by published guidance. While Primary Care is shouldering the increased burden of routine menopause management, changes in patient expectation have resulted in increased complexity of cases and increased numbers of referrals for specialist Menopause care. In Lothian, this is provided by Chalmers Centre.

In 2021/22, the waiting time for specialist Menopause review in Lothian increased rapidly to 70 weeks for non-urgent referrals. By triaging appropriate referrals to receive individualised comprehensive written specialist advice rather than to a Menopause Clinic appointment, the Menopause team has achieved a reduction in the wait for written advice to around 3 weeks; if an appointment is required, the wait is now under 8 weeks. This has been supported by addition of a GP with Special Interest and an additional Menopause specialist nurse to the Menopause Team. RefHelp and RefTalks guidance has been produced and educational sessions provided to support Menopause care in Primary Care, Gynaecology and the Breast Clinic. Chalmers is leading development of a Menopause section for new Scottish Cancer Network breast cancer guidance.

Challenges remain for 2023-24 with regards to ensuring availability of information and education to support Menopause care in non-specialist settings; maintaining the appropriate balance between referrals triaged to advice or to appointment; establishing shared care for initiation and monitoring of testosterone (now often requested by menopausal people in addition to HRT for management of loss of libido). An expected new challenge for the year ahead is management of the potential introduction of neurokinin-3 antagonists, a new class of non-hormonal drug for menopausal vasomotor symptoms.

### 6.3.3 Contraception

Progress on the delivery of Long-Acting Reversible Contraception (LARC) in 2022/2023 included:

- Routine and complex LARC appointments fully restored to pre-pandemic levels within Chalmers and increasingly across local clinics
- 75% LARC capacity available to self-book online
- Online LARC booking extended to local clinics
- Dedicated IUD removal clinics opened and bookable online
- Significant reduction in waiting time for GP routine IUD referrals from 6 months (Nov 2022) to within 4 weeks

Challenges to the delivery of LARC are similar to those across Scotland, and include:

- Ongoing high demand for LARC and (especially IUDs) which is not fully met and difficult to measure
- LARC provision in primary care not fully restored post-pandemic placing additional pressure on SRH services
- Limited LARC training capacity

Future opportunities for further delivery of LARC include:

- Ongoing expansion of LARC provision across locality clinics (including the provision of online booking)
- 1<sup>st</sup> primary care led pilot of LARC community hub (Sept 2023)
- National review of primary care payment scheme for LARC and training capacity issues as part of SG SLWG

Progress on the delivery of postpartum contraception in 2022/2023 included:

- Further face-to-face training sessions delivered to maternity staff in post-partum intra-uterine contraception (PPIUC) and implant insertion across Lothian
- Development of new patient animations x 2 to support antenatal contraceptive discussions (now extended across Scotland via NHS Inform)
- Simplified implant training pathway for clinicians in maternity (now extended across Scotland)
- Development of new NES e-learning module in Postpartum Contraception

Challenges to the delivery of postpartum contraception are similar to those across Scotland, and include:

- Relatively low rates of recorded immediate PPC provision despite documented antenatal discussions (~30%)
- Routine data collection processes suboptimal so difficult to accurately determine and report activity

- Reduction in number of staff trained/available in maternity to provide LARC (especially PPIUC)

Future opportunities for further delivery of postpartum contraception include:

- Successful Scottish Government SHBBV funding application in 2023 to further expand access to postpartum LARC across Scotland including a new bespoke training programme for PPIUC insertion

# Governance, Accountability and Service Usage Data

---

## 6.4 Governance and Accountability

The SHBBV Programme Board continues to provide an oversight role, bringing together those working on SHBBV to discuss opportunities for collaboration to improve population health and reduce health inequalities. The Programme Board, and the work lead by public health is governed by the PPHP Directorate's Population Health Senior Leadership Team, with other workstreams governed separately, for example through Lothian Sexual and Reproductive Health Services. Following the publication of the final version of the Scottish Government SHBBV Strategy (2023-2026) the Programme Board Plans to review its Terms of Reference to ensure that its remit, membership and subgroup structure are appropriate to support the delivery of the national strategy priorities. It is also proposed that going forward the group aligns the content of this SHBBV Programme Board annual report with that of the LSRHS biennial report, to provide a single biennial report covering both clinical and public health work. A shorter report of progress against specific targets, such as the hepatitis C elimination target would still be provided on an annual basis.

## 6.5 Service Usage Data

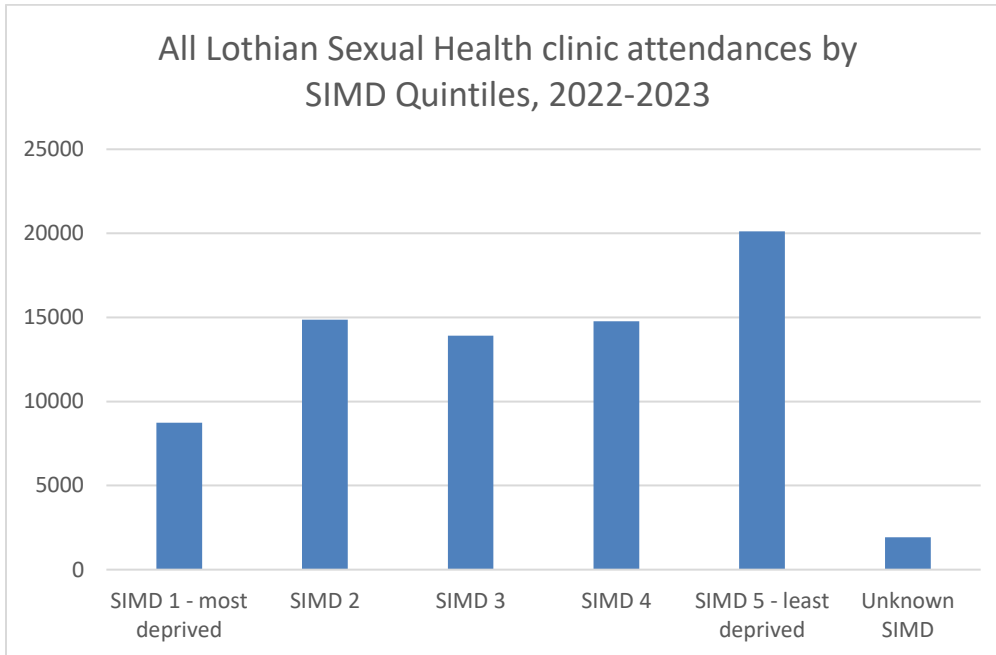
In 2022/23 there has been increasing recognition of the need to improve routine collection and use of patient demographic data, to better understand not just how many individual services are reaching, but which population groups our services are reaching. Work is now ongoing, with support from Lothian Analytical Services, to ensure we are better able to understand our reach, target our work, and thereby provide a more equitable service that will support a reduction in health inequalities.

In 2022-2023 LSRHS recorded 74,337 attendances by 28,037 attendees across clinical services. Mapping attendances by Scottish Index of Multiple Deprivation (SIMD) Quintiles shows that the highest number of attendances were logged among those living in the least deprived 20%, and the lowest number of attendances were logged among those living in the most deprived 20%. The same pattern is observed when looking at attendees (each attendee counted once over the year), as illustrated in charts 1 and 2 below: It is important to remember that these are national SIMD quintiles, and that within Lothian we know that a greater proportion of our total population live in SIMD 5 than in SIMD 1, therefore the pattern of more attendances amongst those living in SIMD 5 may be expected<sup>1</sup>. However we also know that levels of health need, including sexual health need, will be greater in areas of higher deprivation, and the role of local clinics in meeting this need in more deprived areas is important.

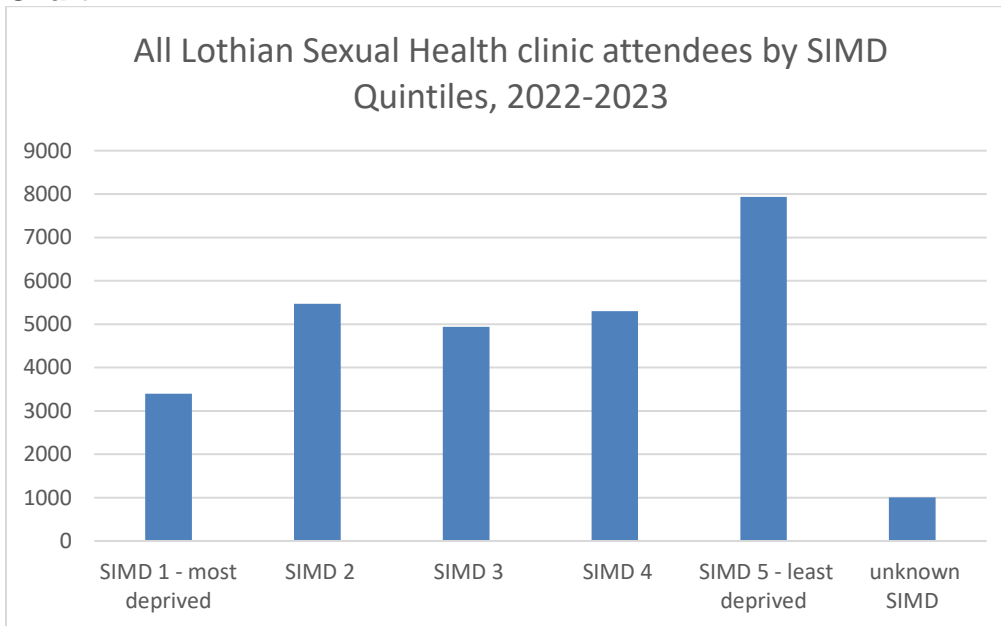
---

<sup>1</sup> Table 1. SIMD 2020 datazones by population share in Lothian (2021): <https://services.nhslothian.scot/publichealth/wp-content/uploads/sites/105/2023/02/NHS-Lothian-Public-Health-Annual-Report-2022-final.pdf>

**Chart 1**

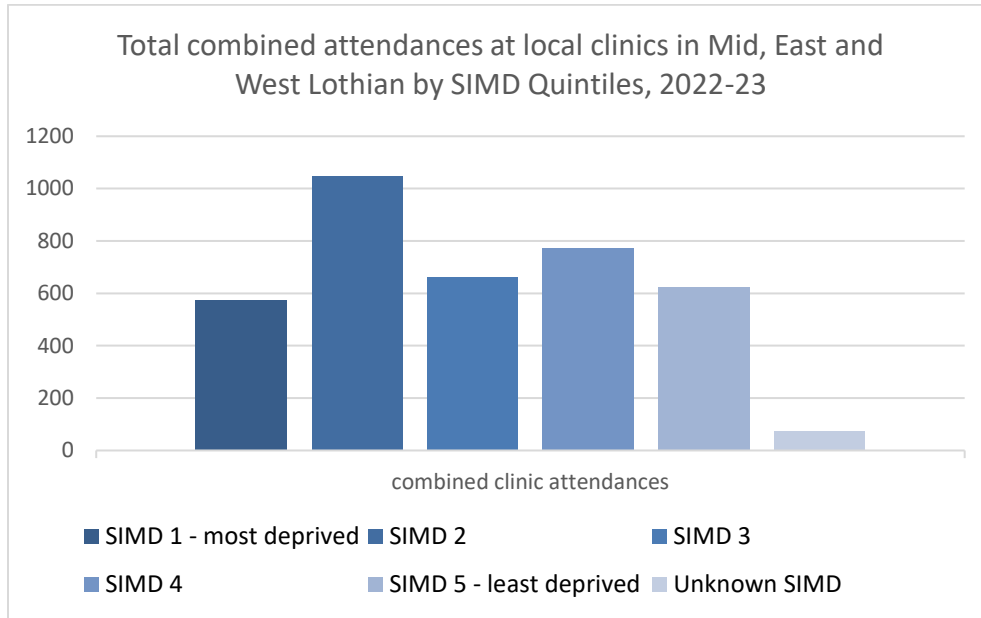


**Chart 2**

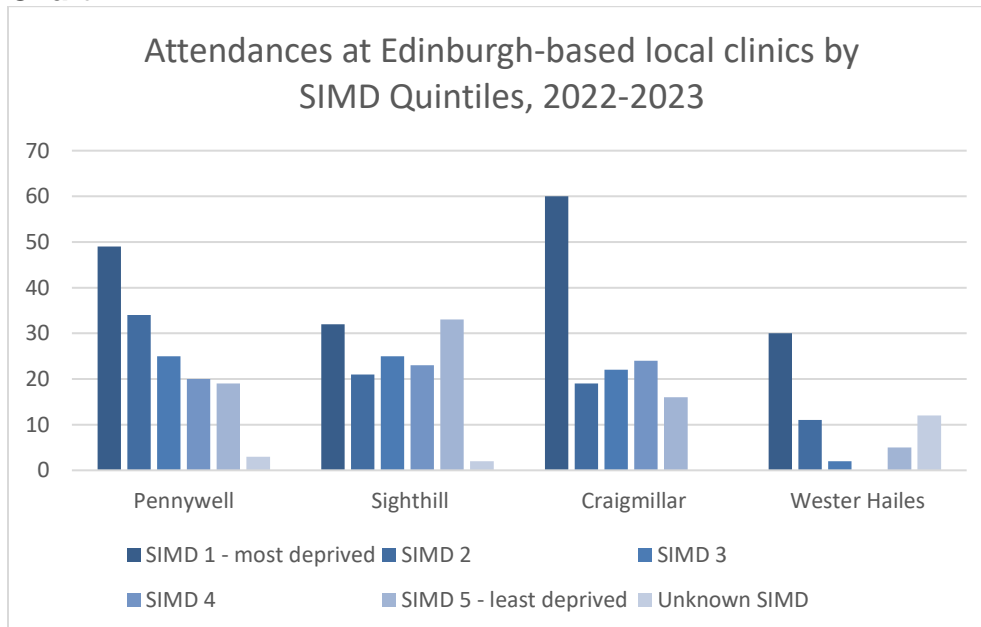


A more equitable reach is seen from local clinics across Mid, East and West Lothian (Chart 3, below) with similar numbers of attendances from those in SIMD1, 3, 4 and 5, and a higher proportion from SIMD 2. Within Edinburgh, where SHBBV locality clinics are deliberately situated in areas of higher deprivation, a higher number of attendances are seen from those living in the most deprived SIMD (Chart 4). It is important to note that not all locality clinics offer the full range of services, so there is a need for continued effort to ensure those in need of specialist services are able to access central clinics where these are provided.

**Chart 3**



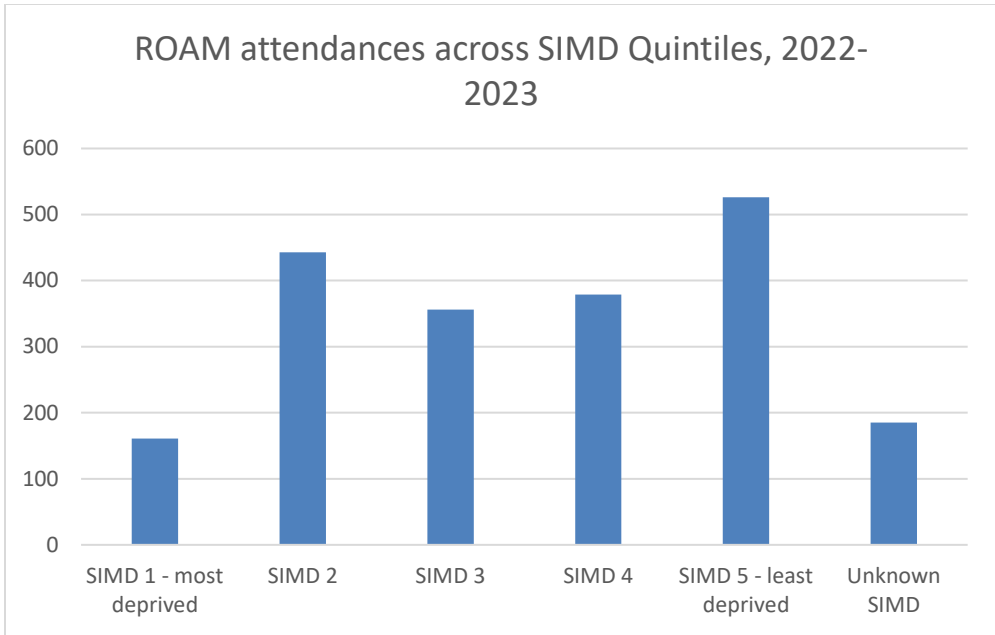
**Chart 4**



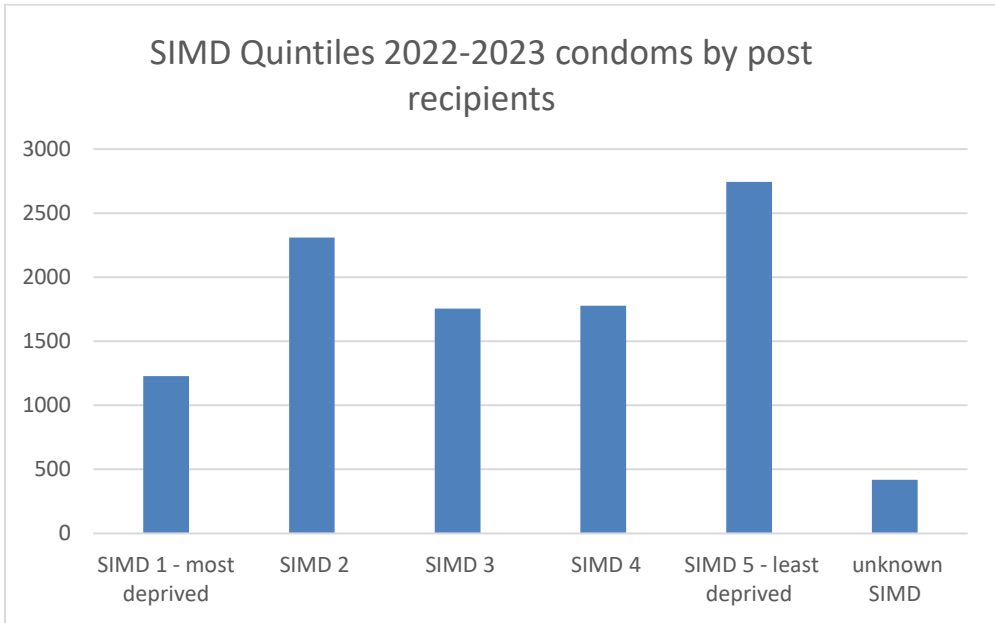
The ROAM service, and the condoms by post service, each echo the pattern of overall attendances across LSRHS clinics, with the highest number of attendances/recipients from the least deprived 20%, as shown in charts 5 and 6 respectively.

**Chart 5**





**Chart 6**



Further data on service usage was provided within the most recent [Lothian Sexual and Reproductive Health Service Biennial Performance Report](#). Going forward we are keen to improve the quality of data recording to enable us to look at levels of attendance by other protected characteristics in order to identify areas of focus for inequalities reduction work. Appendix 1 provides some additional data.

# Conclusion

---

There is a breadth of work ongoing to support the sexual health and wellbeing of the population across Lothian, including work that aligns with the priority areas set out in the draft Scottish Government SHBBV Action Plan. Continued focus on reaching the most vulnerable, and those with the highest level of need, is necessary in order to ensure we continue to improve the health and wellbeing and reduce inequalities within our population.

## **Appendix 1: SHBBV outcomes in Lothian and Scotland**

1. Chlamydia trachomatis
2. Gonorrhoea
3. Hepatitis C
4. HIV
5. Long-Acting Reversible Contraception (LARC)
6. Termination of Pregnancy
7. Teenage Pregnancy
8. Attendance at Lothian Sexual and Reproductive Health Service (LSRHS): pre-Covid comparison data across all attendances, and across young people (13-18 years)

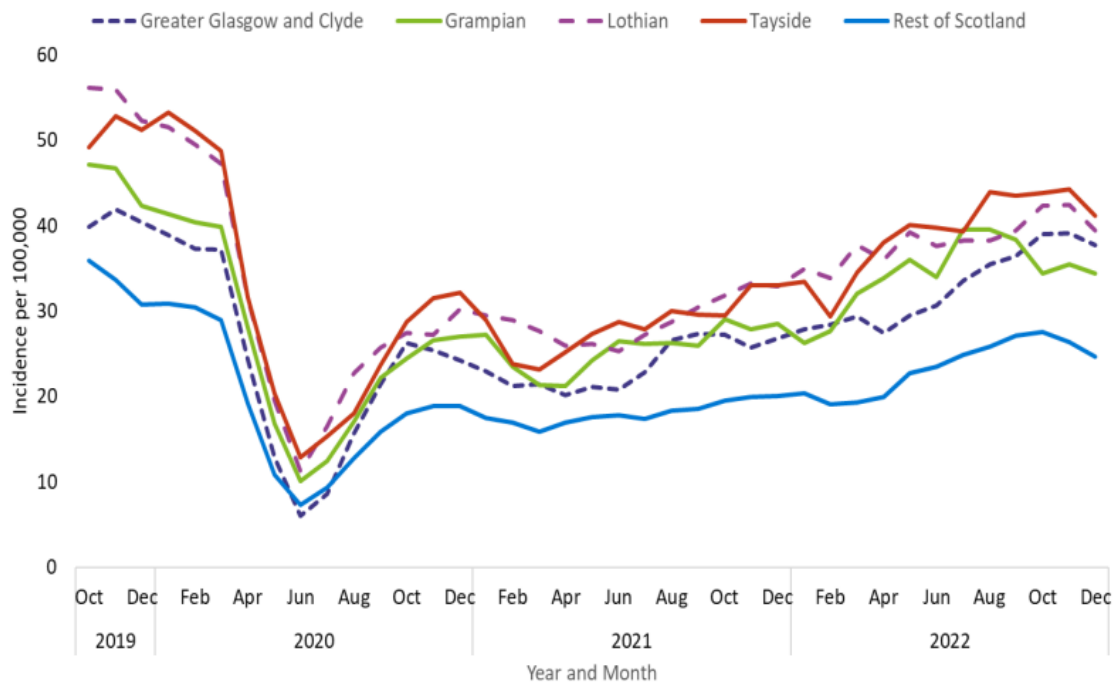
# Appendices

## Appendix 1: SHBBV outcomes in Lothian and Scotland

### 1) Chlamydia trachomatis

The incidence of diagnosed Chlamydia trachomatis infection varies by NHS Board but the national trend is consistent across NHS Boards that have high testing rates, including Lothian. Testing rates in NHS Lothian at the end of 2022 had not recovered to pre-Covid 19 testing rates, as shown in Figure 1.

**Figure 1: Three-month rolling average incidence of diagnosed Chlamydia trachomatis infection per 100,000 persons by selected NHS Board, October 2019 to December 2022**



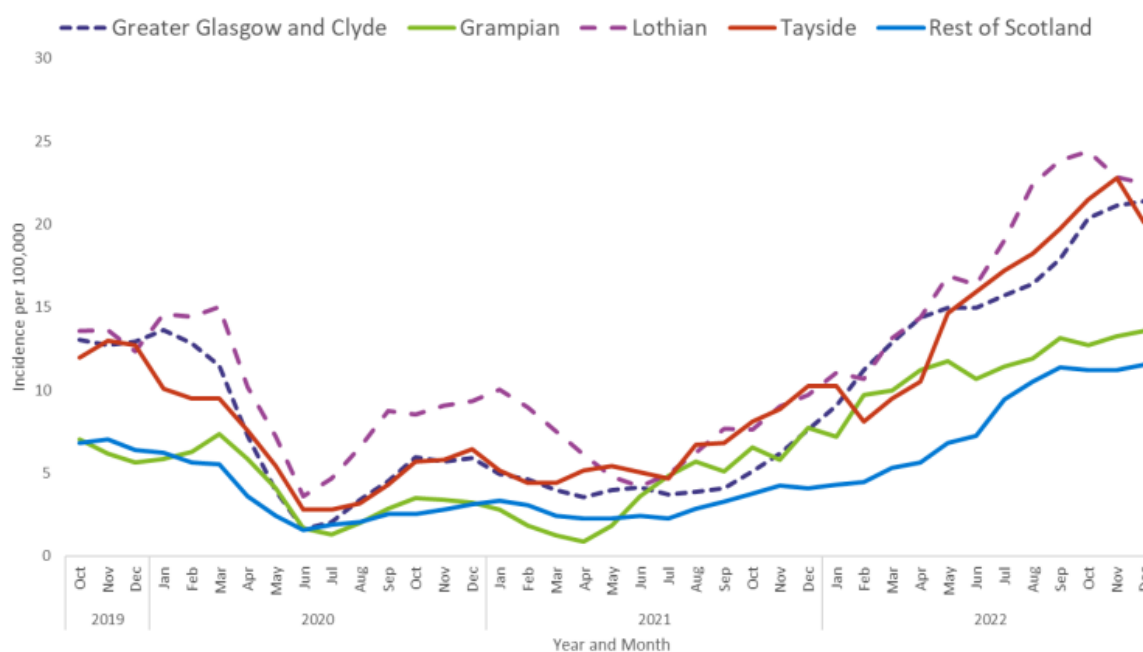
Data source: ECOSS. Incidence is based on number of positives per 100,000 population aged 15-64 years using the National Records for Scotland estimate as at 30 June 2021.

[Chlamydia trachomatis infection in Scotland \(publichealthscotland.scot\)](https://publichealthscotland.scot)

## 2) Gonorrhoea

In 2022, there were 5,641 diagnoses of gonorrhoea in Scotland. This is higher than recent years and represents a 49% increase on that observed in 2019 (3,776). In 2022, three NHS Boards reported 63% of all gonorrhoea diagnoses; NHS Greater Glasgow and Clyde (1,609), NHS Lothian (1,405) and NHS Grampian (539). Almost all NHS Boards reported a historic high in 2022.

**Figure 2: Three-month rolling average incidence of diagnosed gonorrhoea infection per 100,000 persons aged 15-64 years by selected NHS Board, October 2019 to December 2022**



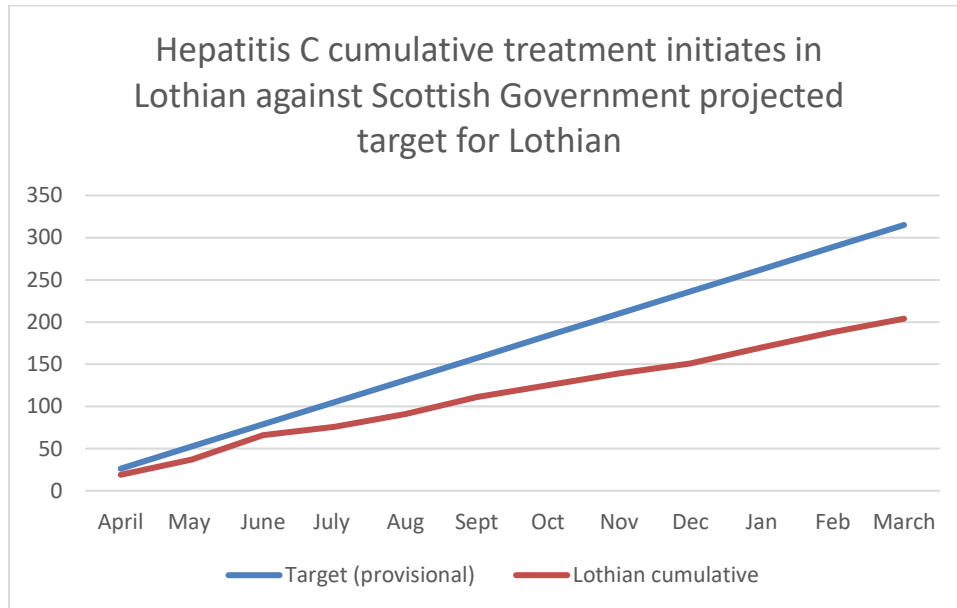
Data source: ECOSS. Incidence is based on number of positives per 100,000 population aged 15-64 years using the National Records for Scotland estimate as at 30 June 2021.

In 2022 most diagnoses of gonorrhoea in Scotland were in men (3,793) and were more than two times higher than diagnoses in women (1,822). In 2022, 77% of diagnoses in women were in those aged less than 25 years compared to 39% in men. This compares to the data in previous years when historically, gonorrhoea diagnoses in women have been mostly in those aged less than 25 years, while in men, diagnoses are more likely to be in older age groups.

[Gonorrhoea infection in Scotland \(publichealthscotland.scot\)](https://publichealthscotland.scot)

### 3) Hepatitis C

**Figure 3: Cumulative number of Hepatitis C treatment initiates in Lothian against the Scottish Government projected\* target for Hepatitis C treatment in Lothian, 2022-2023**

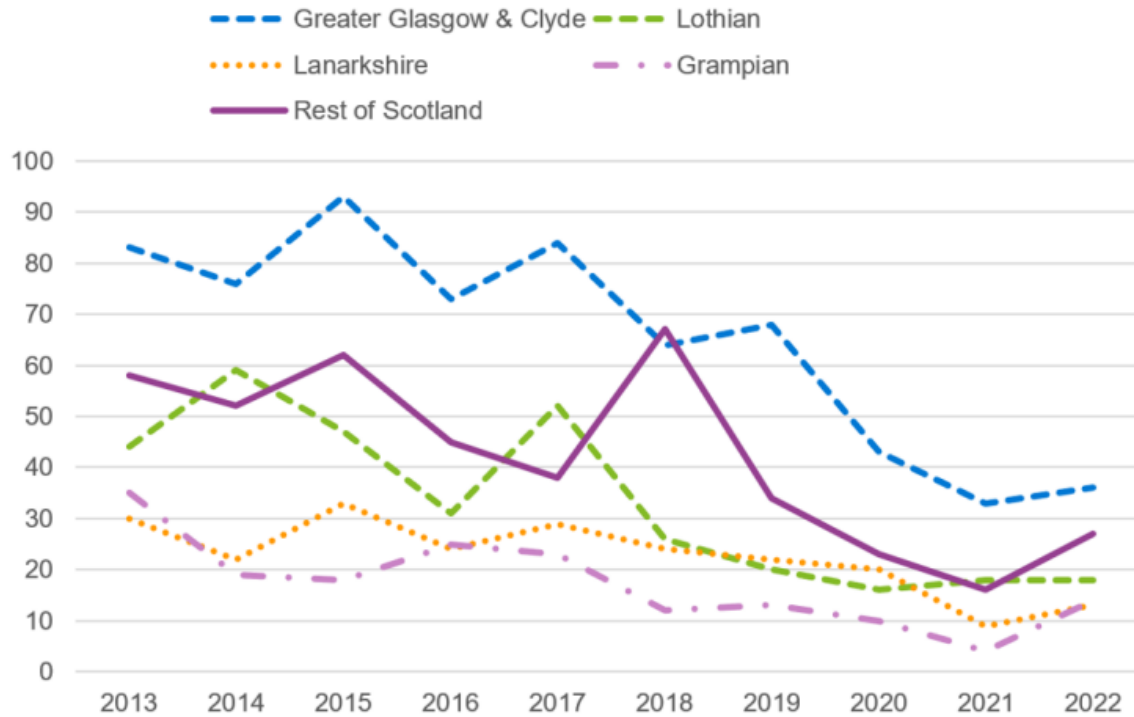


\* a lack of up-to-date epidemiological evidence meant that a notional treatment target was set for 2022-2023 using previous prevalence rates.

National comparator data is not available.

#### 4) HIV

Figure 4: First ever HIV diagnoses by year of report and NHS Board<sup>1</sup>, Scotland 2013 to 2022

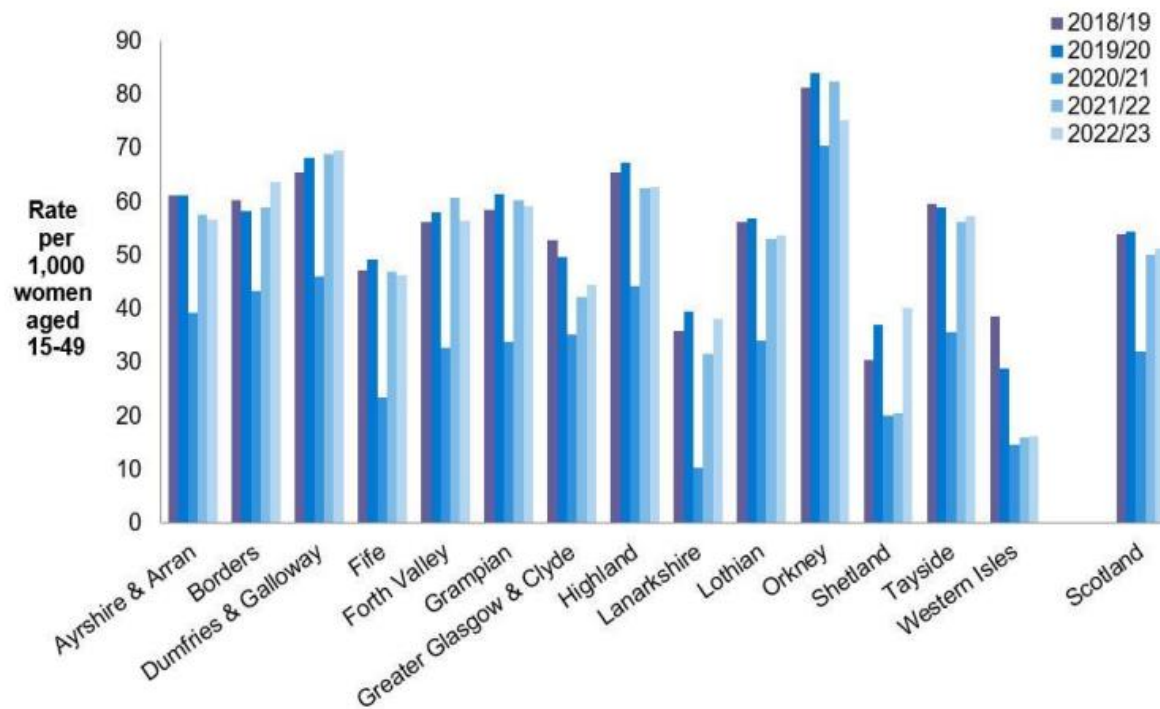


1. Unless otherwise specified, individuals are assigned to a specific NHS board based on the patient's postcode of residence or, where this is not known, the NHS board of treatment/care.

[HIV in Scotland: update to 31 December 2022 \(publichealthscotland.scot\)](https://publichealthscotland.scot)

## 5) Long-acting Reversible Contraception (LARC)

Figure 5: LARC prescribing rate by NHS board of prescription



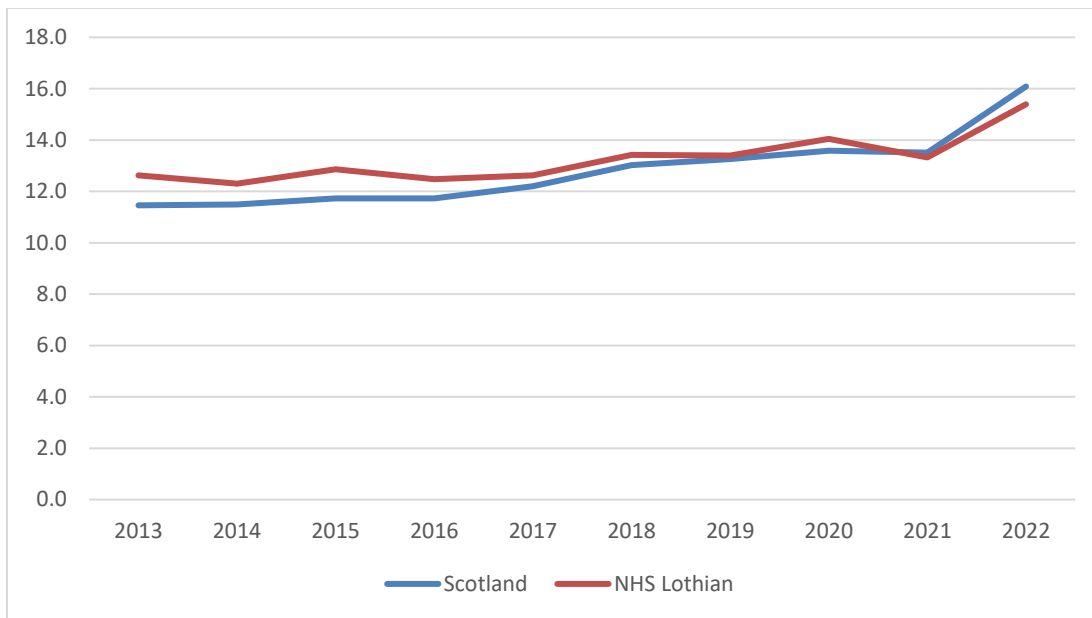
Note: this chart focuses on very long-acting methods of contraception; namely the contraceptive implant, IUD and IUS.

[Long Acting Reversible Methods of Contraception \(LARC\) in Scotland \(publichealthscotland.scot\)](https://publichealthscotland.scot)

## 6) Termination of Pregnancy

The termination rate in Scotland between 2021 and 2022 rose by almost a fifth (19%). This up-tick was evident in the four age groups between 16 and 34 years. The increased rate of terminations in Scotland in 2022 for those aged 16 to 19 years follows a fourteen-year period of falling rates in this age group.

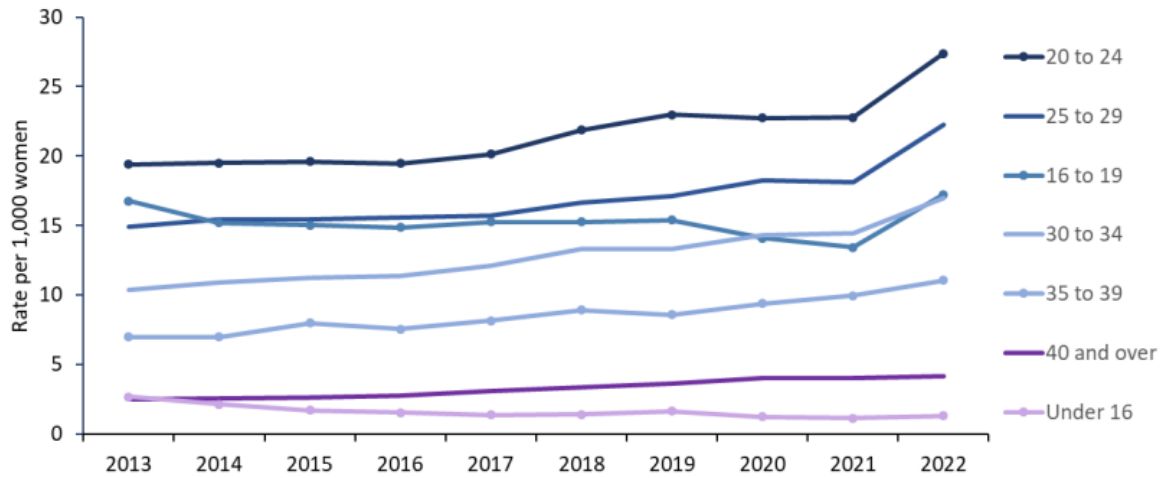
**Figure 6a: Termination rates<sup>1</sup>, Lothian and Scotland-wide, 2013 to 2022**



1. Rate per 1,000 women aged 15-44; based on 2021 mid-year population estimates.

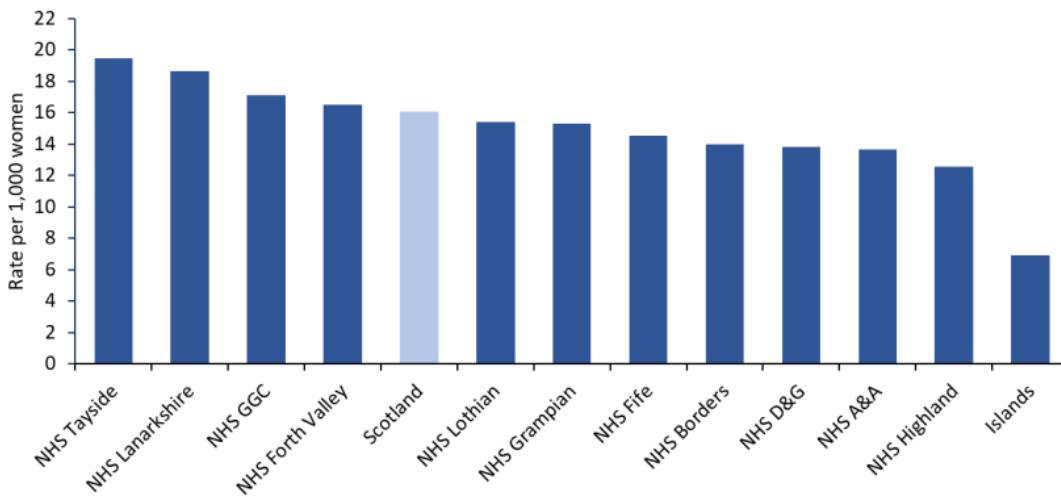


**Figure 6b: Termination rates<sup>1</sup> by age group in Scotland, 2013 to 2022**



1 Rates per 1,000 women in each age group (under 16s calculated using female population aged 13 to 15).

**Figure 6c: Termination rates<sup>1</sup>, NHS Board of residence, 2022**

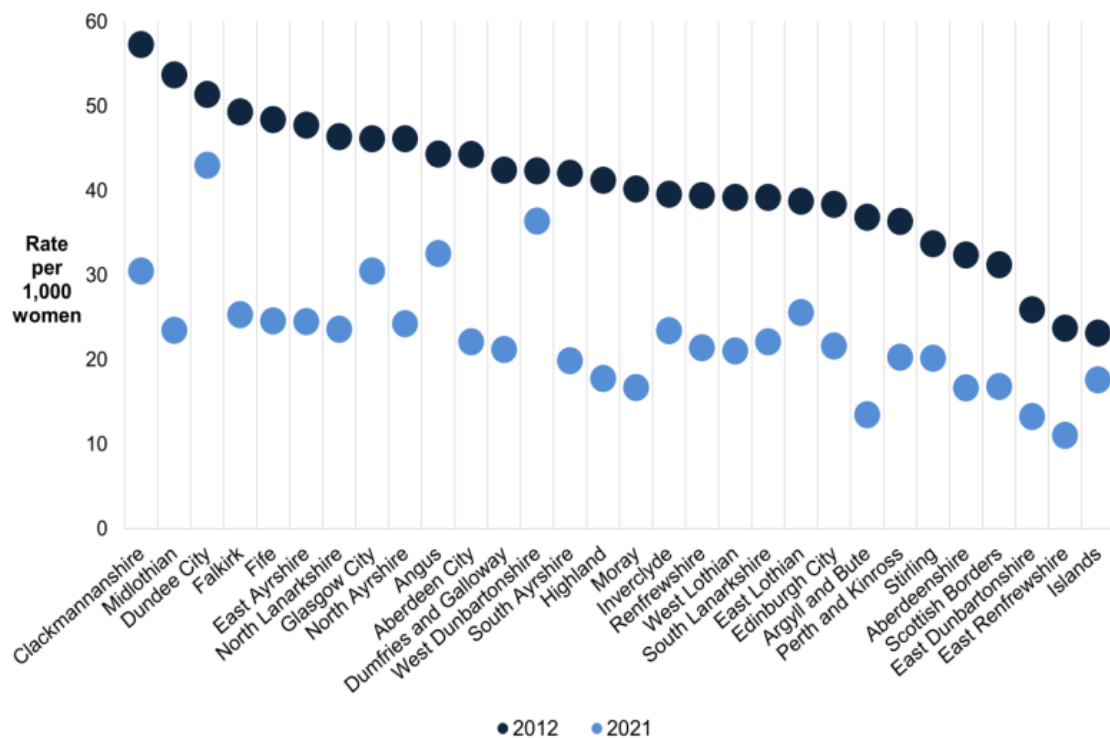


1 Rate per 1,000 women aged 15 to 44; based on 2021 mid-year population estimates.

## 7) Teenage Pregnancy

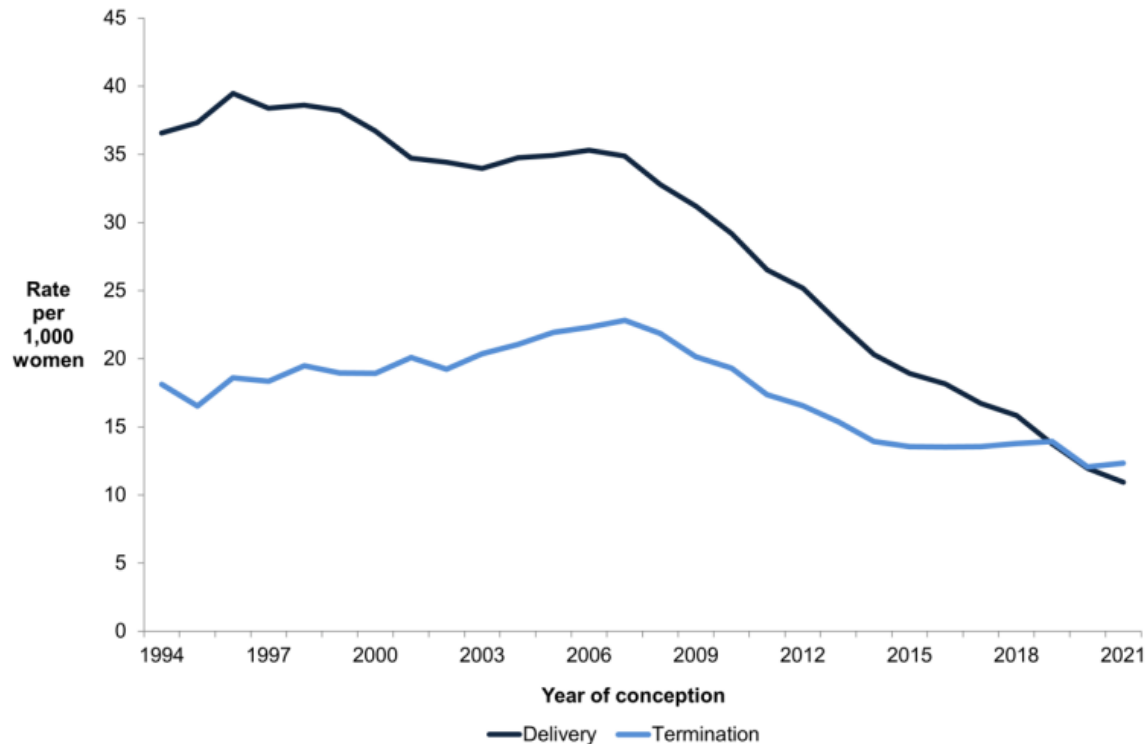
The most up-to-date published data for teenage pregnancy in Scotland covers year of conception 1<sup>st</sup> January to 31<sup>st</sup> December 2021. This data reports the teenage pregnancy rate in Scotland at its lowest level since reporting began, as rates fell for a fourteenth consecutive year to 23.2 per 1,000 women in 2021 (equivalent to 3,221 teenage pregnancies).

**Figure 7a: Teenage pregnancy by local authority, 2012 compared to 2021**



The percentage of teenage pregnancies in Scotland ending in termination rather than delivery has increased gradually over time and is now the more frequent of the two outcomes. This is demonstrated in Figure 7b (below).

Figure 7b: Teenage pregnancy by outcome of pregnancy, in Scotland, 1994-2021



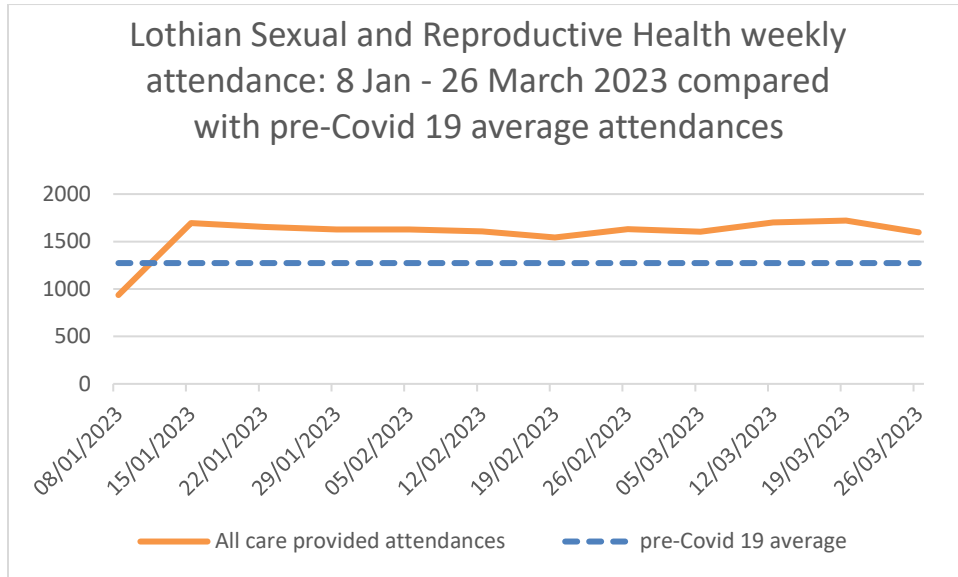
While the delivery rate fell between 2020 and 2021 the termination rate increased slightly, therefore increasing the new gap in outcome of teenage pregnancy, which now sees termination rates being marginally higher than delivery rates.

Although we do not have access to national or local teenage pregnancy data for 2022, Figure 6b (above) shows an increased rate of terminations in Scotland in 2022 for those aged 16 to 19 years (rate per 1000 women). It remains to be seen whether this increased rate reflects a further increase in the proportion of teenage pregnancies ending in termination (as per the trend shown in Figure 7b) and/or an increase in teenage pregnancies after fourteen consecutive years of declining rates in Scotland.

[Teenage Pregnancy \(publichealthscotland.scot\)](https://publichealthscotland.scot)

**8) Attendance at Lothian Sexual and Reproductive Health Service (LSRHS): pre-Covid attendance numbers comparison across all attendances, and across young people (13-18 years)**

**Figure 8a: All weekly care attendances at Lothian Sexual and Reproductive Health Service**

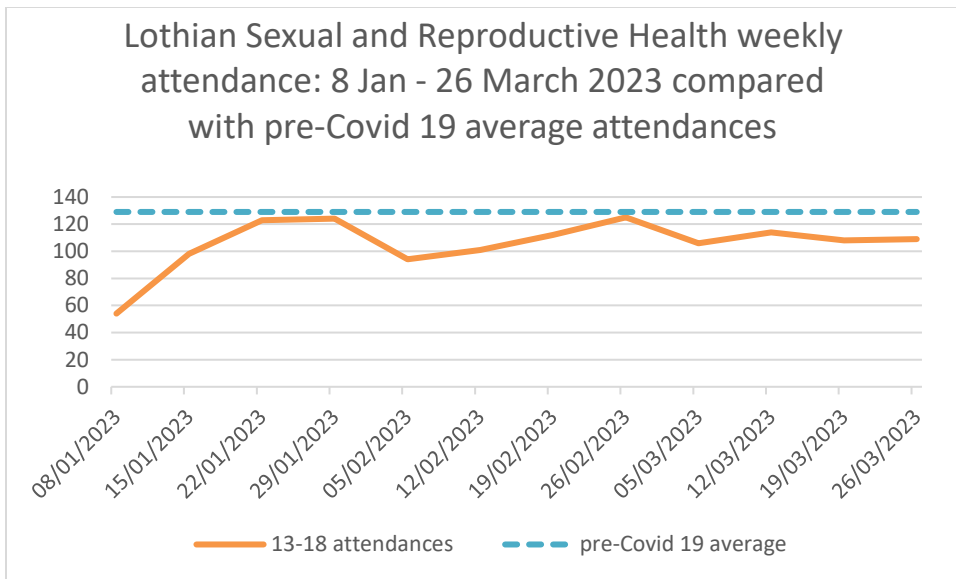


Note: Pre-Covid 19 figures are the average of weeks ending 12/01/20 to 15/03/20

Figure 8a (above) shows weekly attendances across LSRHS (all care attendances) routinely exceeded pre-Covid average attendances (week ending 8 January 2023 to week ending 26 March 2023). This trend is expected to continue across 2023-2024.

Figure 8b (below) shows the weekly care-provided attendances among those age 13 – 18 years at LSRHS during the same 12 weeks as depicted in Figure 8a above. This clearly demonstrates that young people’s attendance has not recovered to pre-Covid levels. To date, young people’s attendance continues to be lower than pre-Covid averages.

**Figure 8b: Weekly attendance at LSRH service, 13-18 year olds**



Note: Pre-Covid 19 figures are the average of weeks ending 12/01/20 to 15/03/20