

Health Overview and Scrutiny Panel

ADDITIONAL INFORMATION / PRESENTATIONS

Thursday, 1st November, 2018
at 6.00 pm

ADDITIONAL INFORMATION RELATED TO THE LISTED REPORTS

Contacts

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ADDITIONAL INFORMATION

7 **SEXUAL HEALTH SERVICES** (Pages 1 - 40)

Presentations to the Panel

Wednesday, 24 October
2018

SERVICE DIRECTOR, LEGAL AND GOVERNANCE



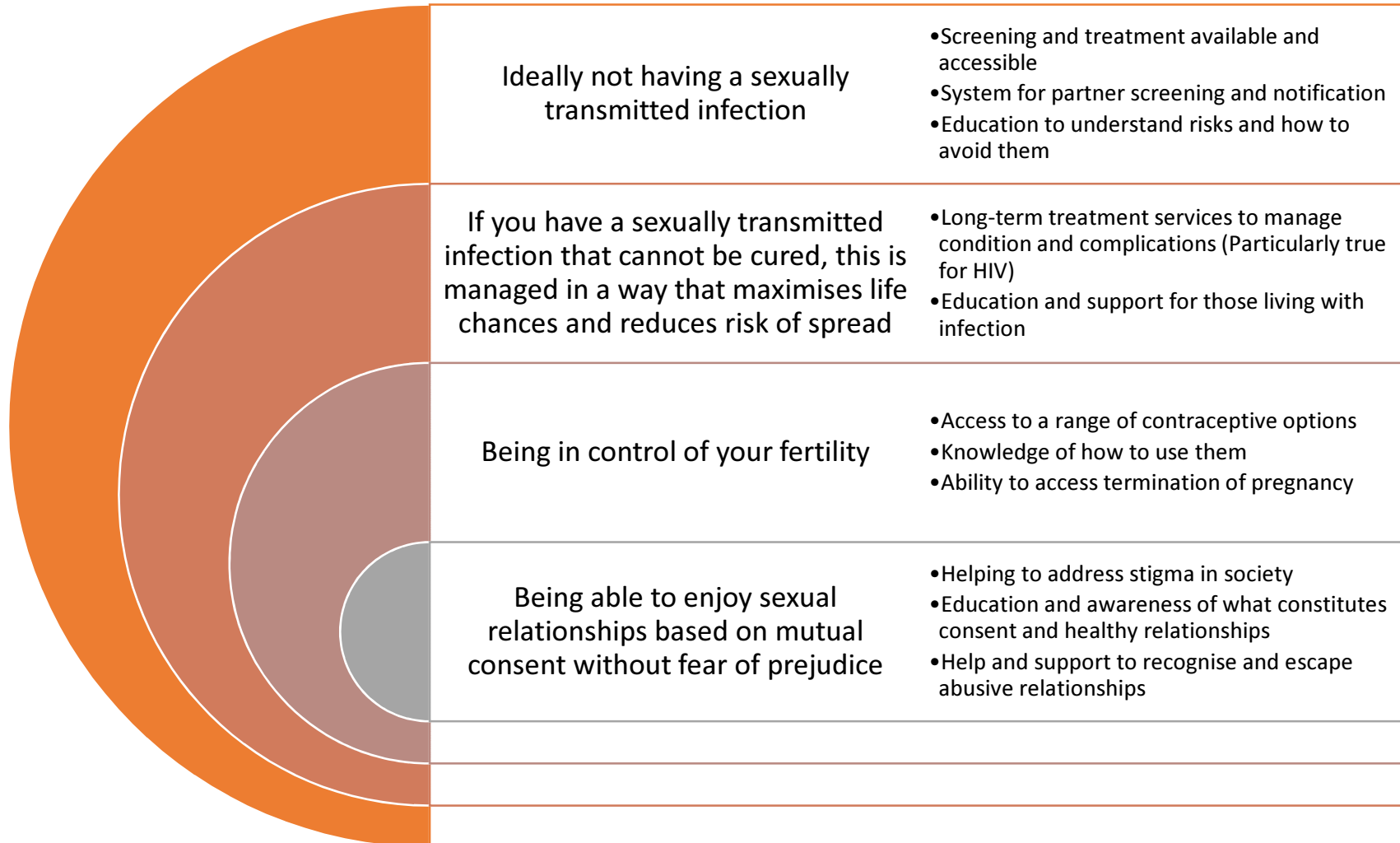
Sexual health – trends

Jason Horsley

Agenda Item 7

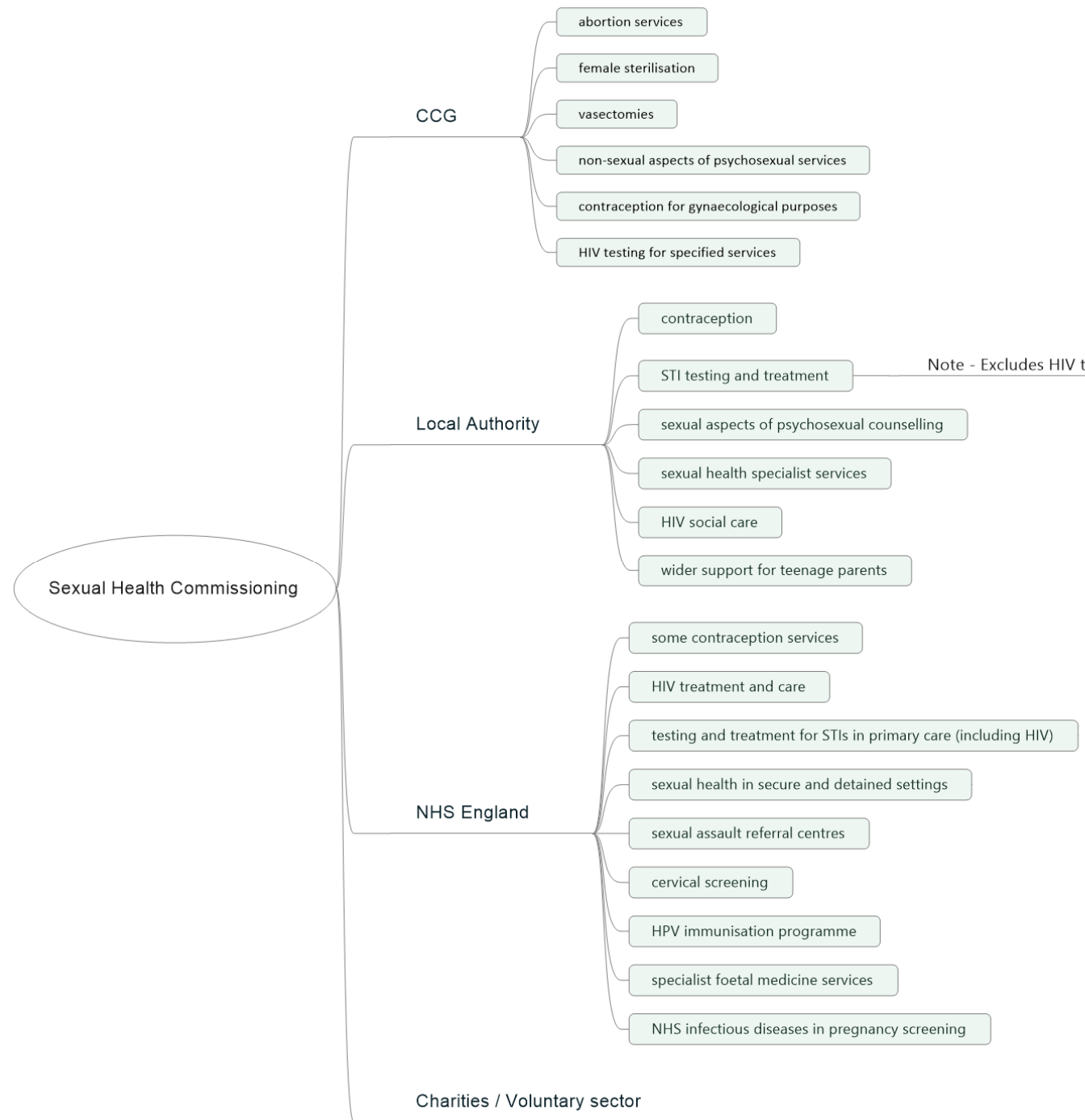
What do we mean by sexual health?

Page 2



A fractured commissioning landscape

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Sexually transmitted infections

Problems with measuring outcomes

Almost all sexually transmitted infections have an asymptomatic period where they don't cause the individual any symptoms, but can be transmitted

Identifying and treating them in this period has a public health benefit, as it reduces spread to the rest of the population and improves outcomes for those who are infected

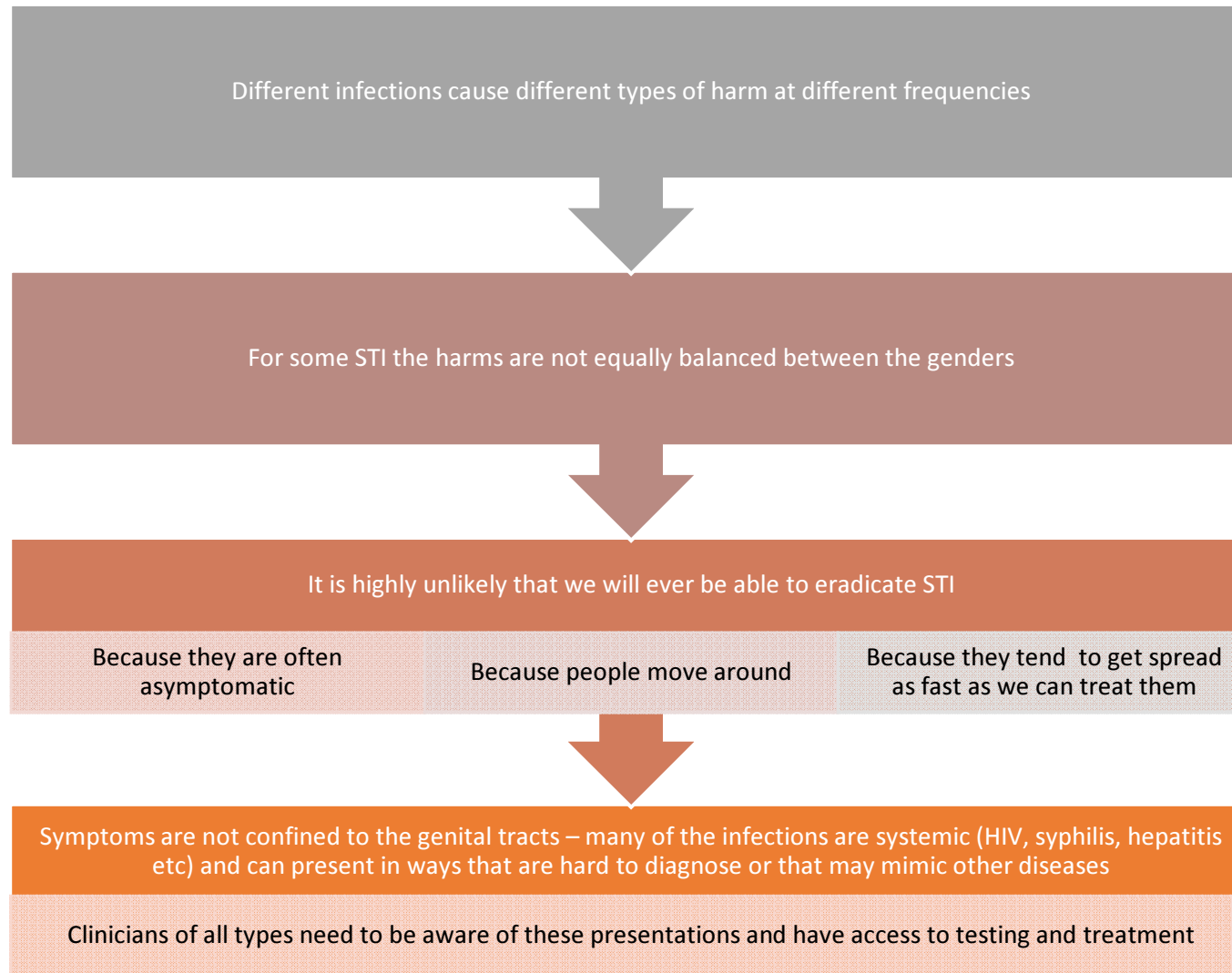
This requires a screening approach – and the more we look for these problems, the more we will find

Take home message for commissioners - Setting targets, especially ones with financial rewards or penalties – based on population prevalence is likely to lead to perverse incentives for providers

- If I get money based on there being a low rate of syphilis in a population, I will have a perverse incentive not to screen for syphilis

Not all sexually transmitted infections are created equal

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Some of the
STI we are
worried
about

Page 7

Disease	Symptoms and Complications
Chlamydia	Discharge, pain when urinating, itching, painful testes in men, or bleeding, pain in lower back/pelvis in women. Infertility.
Genital warts and HPV	Local itch, bleeding, aesthetic changes. Increased risk of cancers.
Gonorrhoea	Discharge, burning pain when urinating, swelling, rarely disseminated infection in the bloodstream
Hepatitis A,B,C	Acute or long term damage to the liver – can cause death through liver failure or increased risk of cancer
Herpes	Blistering sores on the infected area (mouth, throat, genitals, rectum), tiredness, swollen glands. Rarely can cause serious infection in the brain
HIV	Extremely variable – weight loss, diarrhoea, increased risk of other infections and cancers through damage to the immune system
Syphilis	Painless sore where infection begins (penis, mouth, rectum), swollen glands, rash, fevers and flu-like illness, weight loss. Years after initial infection can cause (often irreversible) damage to the heart, brain, nervous system, or bones.

National Trends 2008-2017

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- Number of new STI Dx (excludes HIV)
 - Chlamydia – relatively stable – 10% increase
 - Herpes – relatively stable – 11% increase
 - Syphilis – 148% increase (M 163% >> F 12%)
 - Gonorrhoea – 183% increase in cases (M 225% > F 103%)
 - Warts – 28% decrease (90% decrease in girls age 15-17 - HPV vaccine)
 - Non-specific categories all down
 - TOTAL change is 5% decrease

Trends are often influenced by advances in treatment, but also by social changes for example:

HIV was once seen as a death sentence – but although treatment is expensive and challenging, a person with well managed HIV is likely to live a long and relatively healthy life, and if they are on the right treatment their risk of passing on infection becomes very low.

Syphilis was extremely rare a decade ago, but is increasing in frequency now. This is probably a result of a reduction in condom use, coupled with an increase in opportunities for transmission related to people meeting through online applications.

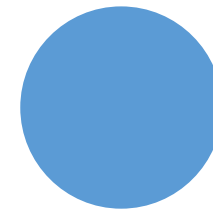
An increase in oral-anal sex practices has been linked to outbreaks of hepatitis A

Pubic lice are becoming increasingly rare, probably because of a trend for people to shave off their pubic hair.

Pornography is more available than ever before and this is likely to be influencing people's ideas of what is normal

- Increased heterosexual anal sex
- Increased normalisation of things that have previously been considered “a fetish”

Changing trends



Other factors
that may
make a
difference

Alcohol and drug use

- Trend for less alcohol use in teens
- Harder to be sure about drugs

Increasing worklessness or exposure to “gig economy” in younger generation

Increasing concept of gender fluidity in today's teenagers

Increases in hate crime

Summary



Complicated commissioning landscape



Difficult to measure success



Sociological changes are having a significant impact on spread

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Reproductive and Sexual Health in Southampton - 2019-24 Health Overview and Scrutiny Panel

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Thursday 1st November 2018

Agenda Item 7
Appendix 3

Introduction

- **Overview of key Sexual Health Outcomes in Southampton communities**
- **Overview of what we commission to support reproductive and sexual health in Southampton**
- **Sexual Health improvement priorities for 2019-2024**

Discussion

Sexual Health Vs similar communities

Compared with benchmark: Better Similar Worse Lower Similar Higher Not compared

Indicator	Period	England	Fourth more deprived decile (MD2...)	Brent	Bristol	County Durham	Enfield	Gateshead	Greenwich	Leeds	Luton	Plymouth	Portsmouth	Sefton	Sheffield	Southampton	Walsfield	Wirral
Syphilis diagnostic rate / 100,000	2017	12.5	12.8*	36.5	8.8	3.8	11.1	9.9	36.2	11.3	6.9	3.8	25.8	2.9	9.1	20.0	13.1	7.8
Gonorrhoea diagnostic rate / 100,000	2017	78.8	85.4*	202.5	57.5	52.3	136.4	75.0	225.0	96.8	52.8	75.1	78.7	35.3	58.2	61.1	40.9	55.9
Chlamydia detection rate / 100,000 aged 15-24 (PHOF indicator 3.02)	2017	1882	2268	2103	1691	1620	2041	1979	3265	3475	1247	2831	2003	1638	1695	2378	2161	2563
		<1,900	1,900 to 2,300	≥2,300														
Chlamydia proportion aged 15-24 screened	2017	19.3	21.8	23.4	24.6	16.3	17.5	17.5	33.7	28.0	12.8	25.6	17.0	19.1	18.6	18.2	19.6	24.2
New STI diagnoses (exc chlamydia aged <25) / 100,000	2017	794	888	1692	1011	569	1062	682	1502	811	684	985	875	618	608	1124	413	658
HIV testing coverage, total (%)	2017	65.7	66.7*	80.7	72.5	71.8	70.0	65.6	72.2	63.4	70.9	75.1	62.6	36.0	82.2	69.7	34.8	65.2
HIV late diagnosis (%) (PHOF indicator 3.04)	2015 - 17	41.1	45.0	38.9	49.0	33.3	57.3	36.4	42.0	53.4	50.0	39.5	24.1	46.4	41.2	49.2	40.7	50.0
		<25%	25% to 50%	≥50%														
New HIV diagnosis rate / 100,000 aged 15+	2017	8.7	10.2*	24.4	12.4	4.6	14.6	5.3	21.0	12.9	13.9	6.9	7.4	4.8	6.9	12.0	2.9	4.9
HIV diagnosed prevalence rate / 1,000 aged 15-59	2017	2.32	2.44*	4.43	2.55	0.71	3.67	1.52	6.29	2.68	4.06	1.45	1.97	1.17	1.72	2.43	1.35	1.20
		<2	2 to 5	≥5														
Population vaccination coverage – HPV vaccination coverage for one dose (females 12-13 years old) (PHOF indicator 3.03xii)	2016/17	87.2	87.3*	75.9	76.4	90.7	73.6	91.7	82.4	93.4	80.9	85.1	96.0	90.0	91.0	93.4	91.1	91.3
		<80%	80% to 90%	≥90%														
Under 25s repeat abortions (%)	2017	26.7	26.4	30.6	24.3	20.4	30.8	23.4	30.0	26.6	30.9	22.1	23.0	27.0	24.4	26.2	27.9	27.9
Abortions under 10 weeks (%)	2017	76.6	77.8	74.5	79.0	72.5	74.6	77.5	69.8	80.1	78.7	83.6	82.3	78.4	74.8	79.5	80.8	83.8
Total prescribed LARC excluding injections rate / 1,000	2016	46.4	46.3	33.5	67.1	39.6	30.6	52.1	50.0	52.7	29.7	64.0	49.4	30.8	39.2	50.9	50.6	38.0
Under 18s conception rate / 1,000 (PHOF indicator 2.04)	2016	18.8	22.1	13.3	17.2	21.6	20.6	20.6	20.9	27.9	21.7	19.6	26.4	20.9	21.2	31.7	20.1	26.2
Under 18s conceptions leading to abortion (%)	2016	51.8	47.2	59.2	38.7	37.0	52.8	55.4	50.0	47.3	53.5	48.1	46.3	57.4	40.9	49.1	40.9	51.4
Sexual offences rate / 1,000 (PHOF indicator 1.12iii)	2016/17	1.9	2.1	1.6	2.5	2.0	1.5	2.0	1.9	2.5	1.6	2.6	3.4	1.5	2.0	3.4	2.0	1.5

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Sexual Health Vs South East communities

Compared with benchmark: Better Similar Worse Lower Similar Higher Not compared

Indicator	Period	England	South East region	Bracknell Forest	Brighton and Hove	Buckinghamshire	East Sussex	Hampshire	Isle of Wight	Kent	Medway	Milton Keynes	Oxfordshire	Portsmouth	Reading	Slough	Southampton	Surrey	West Berkshire	West Sussex	Windsor and Maidenhead	Wokingham
Syphilis diagnostic rate / 100,000	2017	12.5	9.5	4.2	62.7	4.9	4.7	9.4	0.7	6.0	9.7	5.6	3.5	25.8	12.3	8.8	20.0	8.1	4.4	8.9	5.3	4.3
Gonorrhoea diagnostic rate / 100,000	2017	78.8	45.9	30.9	214.9	34.1	47.7	32.2	12.1	31.0	48.4	55.2	37.7	78.7	99.0	59.6	61.1	40.3	17.0	48.6	29.4	30.0
Chlamydia detection rate / 100,000 aged 15-24 (PHOF indicator 3.02)	2017	1882	1510	1060	2250	1017	1723	1668	1489	1272	1670	2092	1312	2003	1871	1257	2378	1161	1365	1414	1102	1350
Chlamydia proportion aged 15-24 screened	2017	19.3	17.1	12.0	34.1	15.6	21.7	17.2	20.5	14.1	19.6	20.3	17.2	17.0	19.8	12.9	18.2	13.6	13.4	16.1	13.3	15.0
New STI diagnoses (exc chlamydia aged <25) / 100,000	2017	794	648	437	1596	578	609	616	484	499	621	660	669	875	986	721	1124	565	400	633	505	471
HIV testing coverage, total (%)	2017	65.7	69.2	75.7	68.2	68.3	61.9	63.8	62.1	70.4	61.1	76.3	77.9	62.6	70.4	75.0	69.7	69.8	68.2	77.1	78.9	68.8
HIV late diagnosis (%) (PHOF indicator 3.04)	2015 - 17	41.1	44.0	39.1	34.1	47.1	44.0	50.4	-	61.7	46.9	54.8	40.0	24.1	37.0	41.0	49.2	34.0	-	42.2	40.0	30.8
New HIV diagnosis rate / 100,000 aged 15+	2017	8.7	5.8	3.1	18.3	5.1	6.0	3.4	0.8	4.4	5.8	13.4	4.5	7.4	18.3	16.1	12.0	3.5	2.3	5.4	7.4	6.0
HIV diagnosed prevalence rate / 1,000 aged 15-59	2017	2.32	1.81	1.66	8.15	1.41	1.80	1.13	0.42	1.32	1.59	3.25	1.11	1.97	3.52	3.42	2.43	1.44	0.85	1.79	1.54	1.24
Population vaccination coverage – HPV vaccination coverage for one dose (females 12-13 years old) (PHOF indicator 3.03xii)	2016/17	87.2	86.7	95.5	76.8	91.9	73.6	93.1	89.4	79.9	84.6	89.1	94.0	96.0	96.8	88.9	93.4	82.4	94.0	84.9	93.8	91.2
Under 25s repeat abortions (%)	2017	26.7	25.6	21.0	23.9	28.4*	29.0	22.6	13.9	27.4	31.0	31.0	22.5*	23.0	28.7	25.5	26.2	24.4	26.7	23.7	22.9	27.1
Abortions under 10 weeks (%)	2017	76.6	75.7	75.9	73.4	74.6*	72.6	80.6	80.4	70.4	69.2	86.7	77.8*	82.3	79.0	73.4	79.5	73.9	80.3	73.4	78.4	77.9
Total prescribed LARC excluding injections rate / 1,000	2016	46.4	54.0	40.8	54.1	50.2	55.4	62.2	80.0	47.8	38.7	58.8	59.5	49.4	58.3	32.9	50.9	51.9	58.6	64.4	48.7	37.3
Under 18s conception rate / 1,000 (PHOF indicator 2.04)	2016	18.8	15.0	8.3*	17.9	10.4	16.1	13.3	24.2	18.5	22.3	19.1	11.6	26.4	19.7	12.2	31.7	11.2	12.9	12.2	8.5	8.1
Under 18s conceptions leading to abortion (%)	2016	51.8	54.2	57.9	64.8	64.4	51.4	59.0	41.8	49.6	42.6	62.9	56.5	46.3	62.5	40.6	49.1	63.6	60.0	48.1	52.2	56.5
Sexual offences rate / 1,000 (PHOF indicator 1.12iii)	2016/17	1.9	1.9	1.6	2.6	1.4	1.9	1.9	3.0	2.1	2.6	2.1	1.8	3.4	2.4	2.1	3.4	1.4	1.6	1.6	1.3	0.9

Overview of Key Southampton SH outcomes

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	Previous Year	Current Year	Change	% Change	Current Year
HIV & STI					
Syphilis diagnostic rate / 100,000	8.8	20	11.2	127%	2017
New STI diagnoses (exc chlamydia aged <25) / 100,000	1853	1960	107	6%	2017
STI testing positivity (exc chlamydia aged <25) %*	4.8	5.4	0.6	13%	2017
STI testing rate (exc chlamydia aged <25) / 100,000*	22234	20821	-1413	-6%	2017
New HIV diagnosis rate / 100,000 aged 15+	10.1	12.0	1.9	18%	2017
HIV late diagnosis (%) (PHOF indicator 3.04)	54.5	49.2	-5.3	-10%	2014-16
Reproductive Health					
%age of Abortions completed in less than 10 weeks	78.9	79.5	0.4	1%	2017
GP prescribed LARC excluding injections rate / 1,000	29	26.1	-2.9	-10%	2016
SRH Services prescribed LARC excluding injections rate / 1,000	21.6	24.8	3.2	15%	2016
Total prescribed LARC excluding injections rate / 1,000	50.6	50.9	0.3	1%	2016
Pelvic inflammatory disease (PID) admissions rate / 100,000	288	330	42	15%	2016/17
Other					
Under 18s conception rate / 1,000	29.3	31.7	2.4	8%	2016
Sexual offences rate / 1,000	3.2	3.4	0.2	6%	2016/17

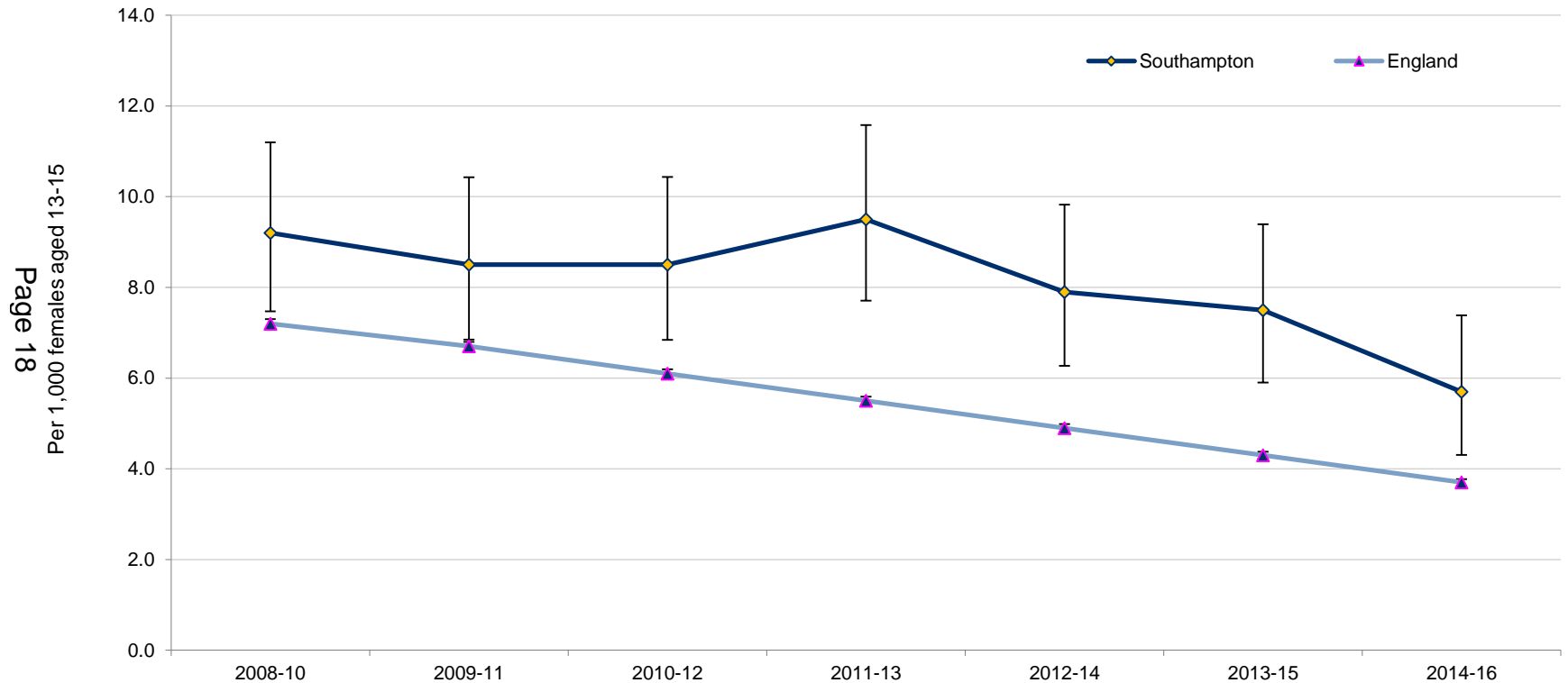
Comparison to previous year

>5% worse
0-5% Worse
Improvement

* RAG based on increase or decrease

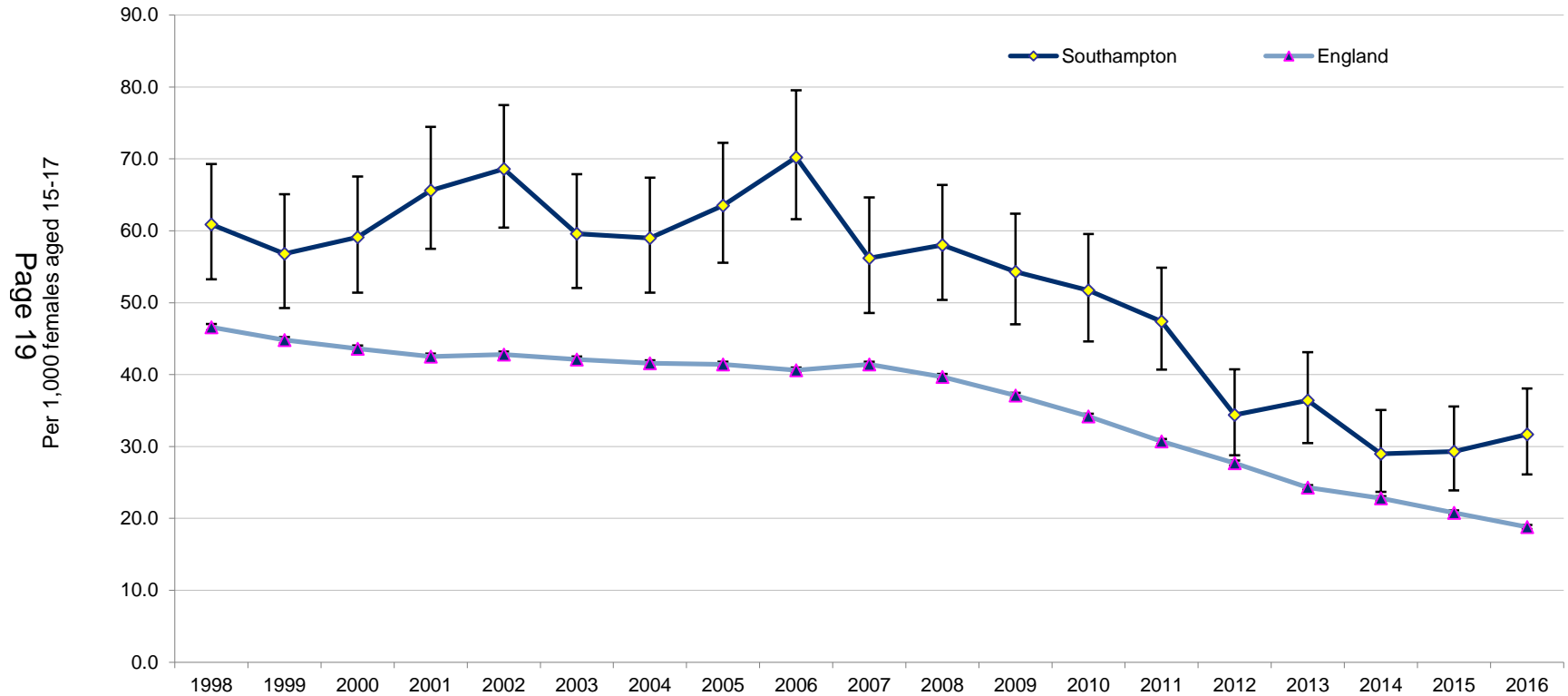
U16 Conceptions – Southampton trend

Under 16 conception rate per 1,000 female population: Southampton and England trend 2008-10 to 2014-16 (pooled)



U18 Conceptions – Southampton trend

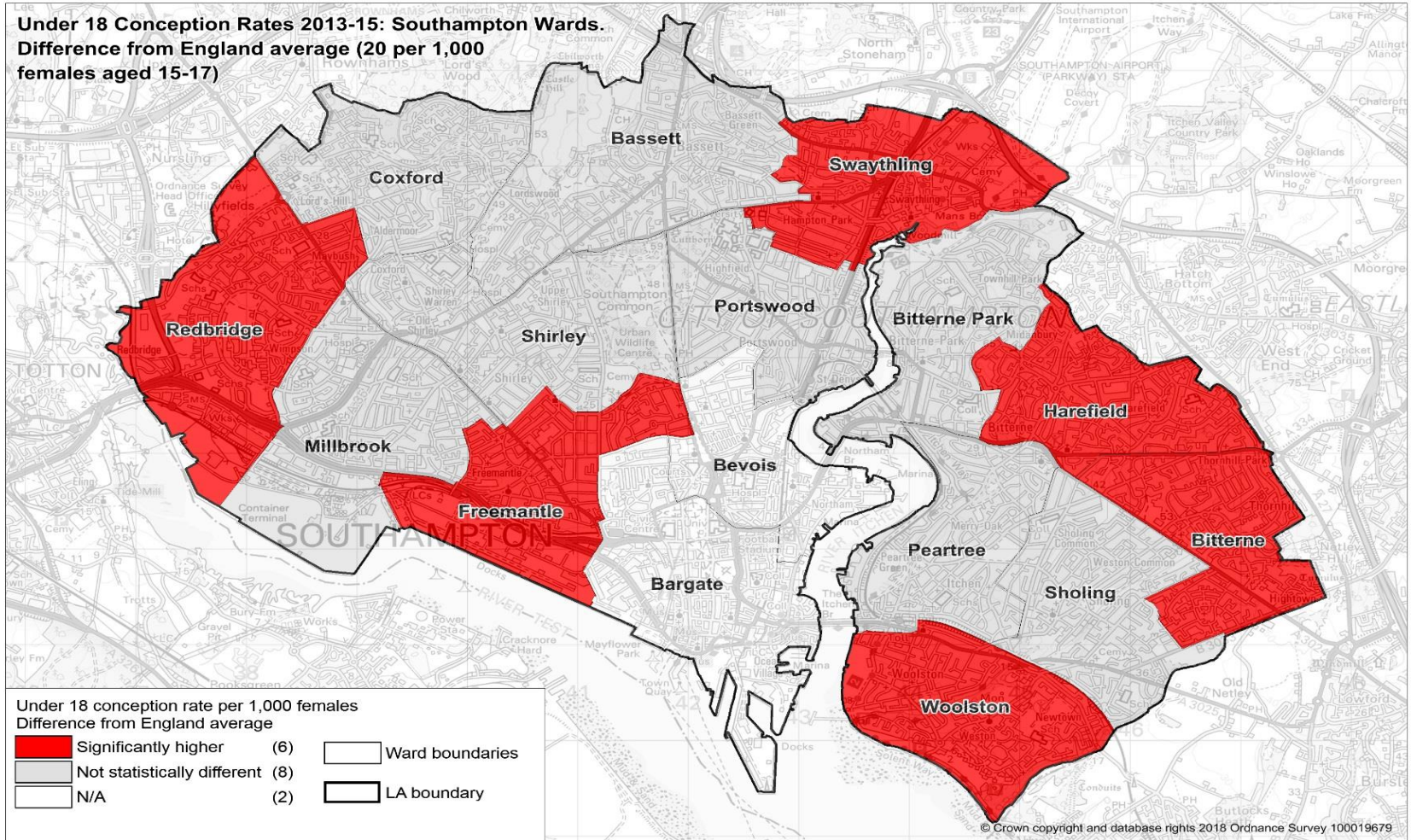
Under 18 conception rate per 1,000 female population, aged 15-17: Southampton and England trend 1998 to 2016



Source: Office for National Statistics

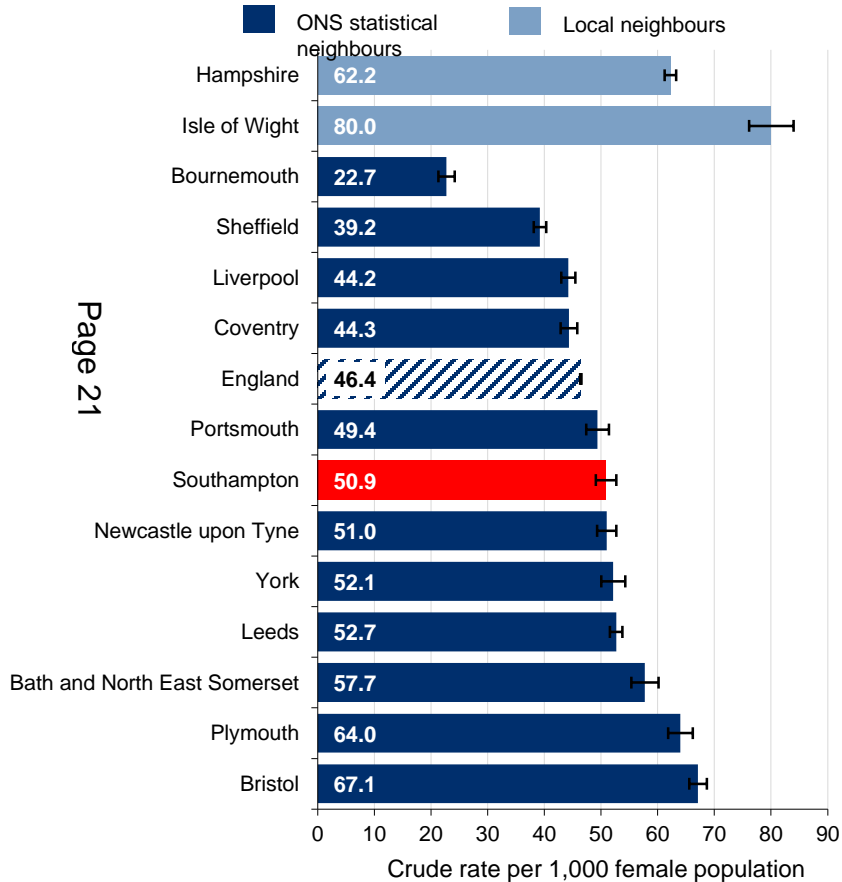
U18 Conceptions – Ward level analysis

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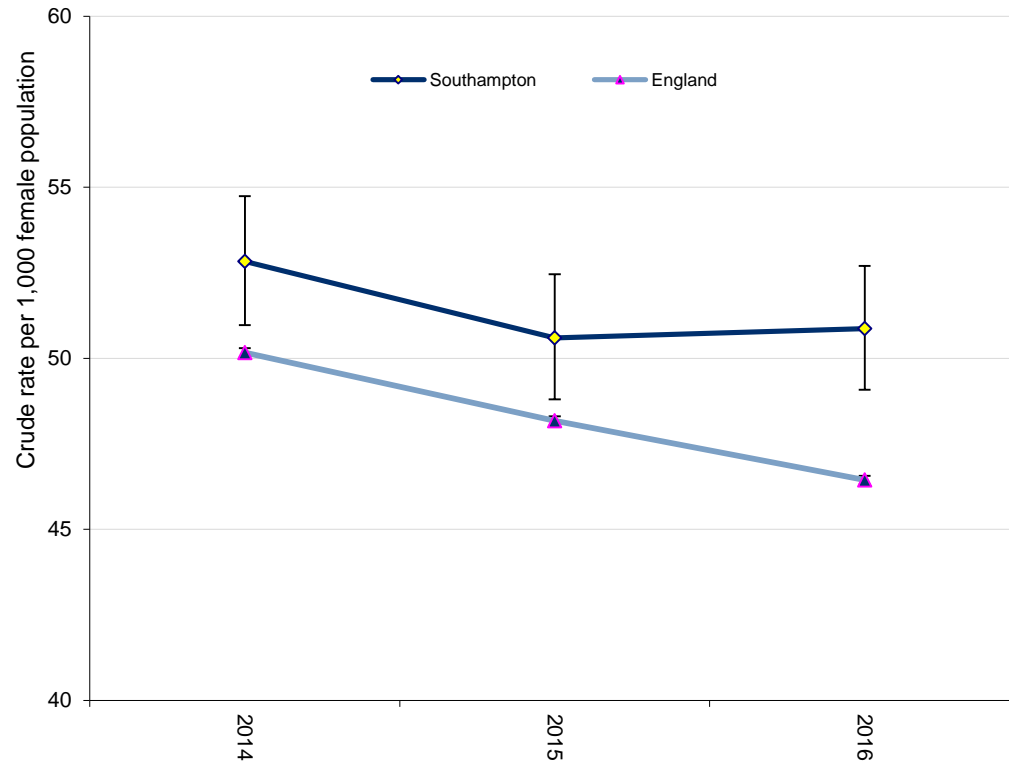


Long Acting Reversible Contraception

Total prescribed LARC: 2016 - Southampton & ONS Comparator Local Authorities: Females aged 15-44 years



Total prescribed LARC - Southampton and England trend: 2014 to 2016: Females aged 15-44 years

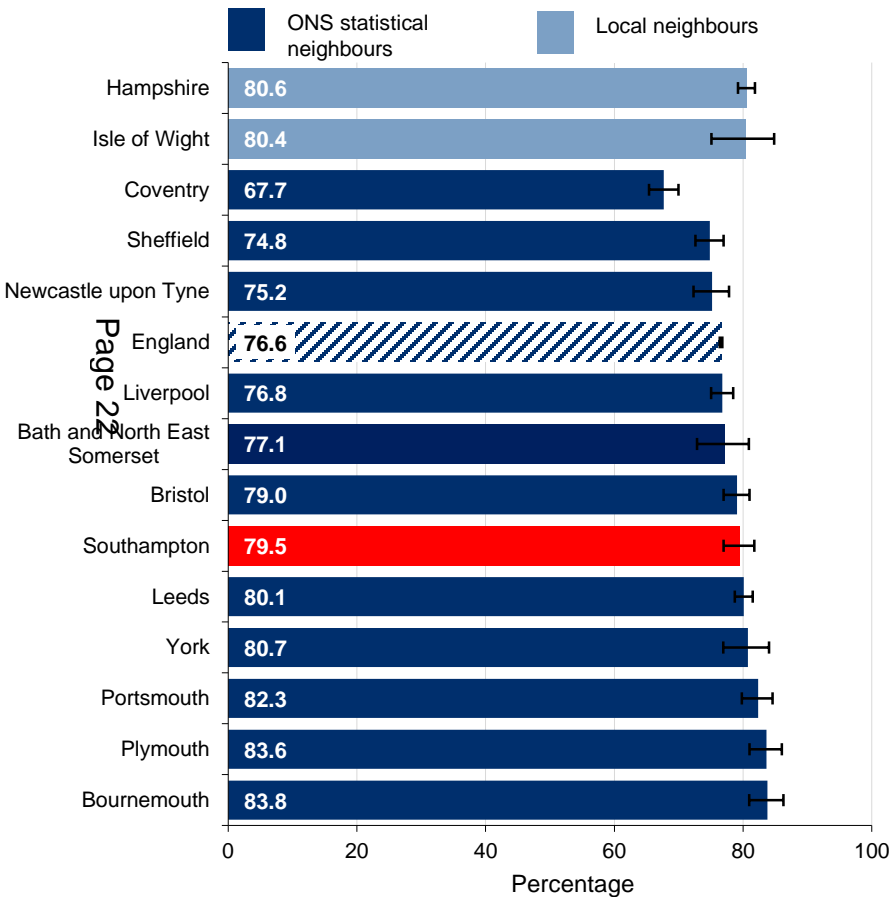


Sources: NHS Digital via Public Health England

Source: NHS Digital via Public Health

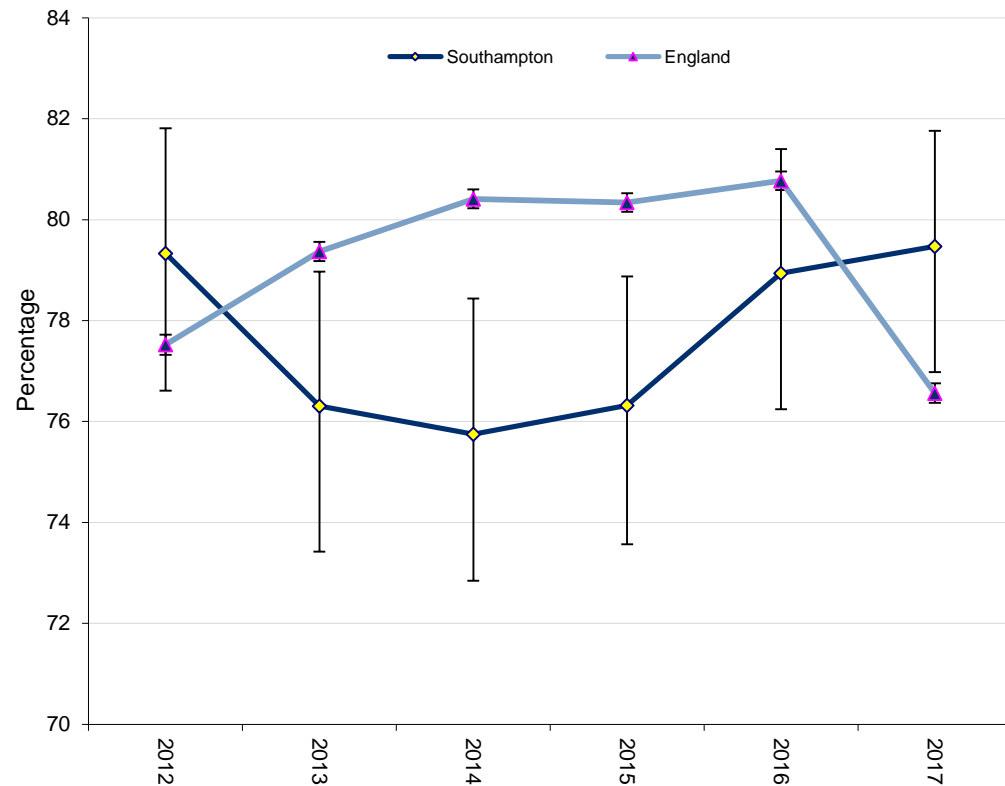
Timeliness of Terminations of Pregnancy

Percentage of abortions under 10 weeks gestation: 2017- Southampton & ONS Comparator Local Authorities



Sources: Public Health England via the Department of Health

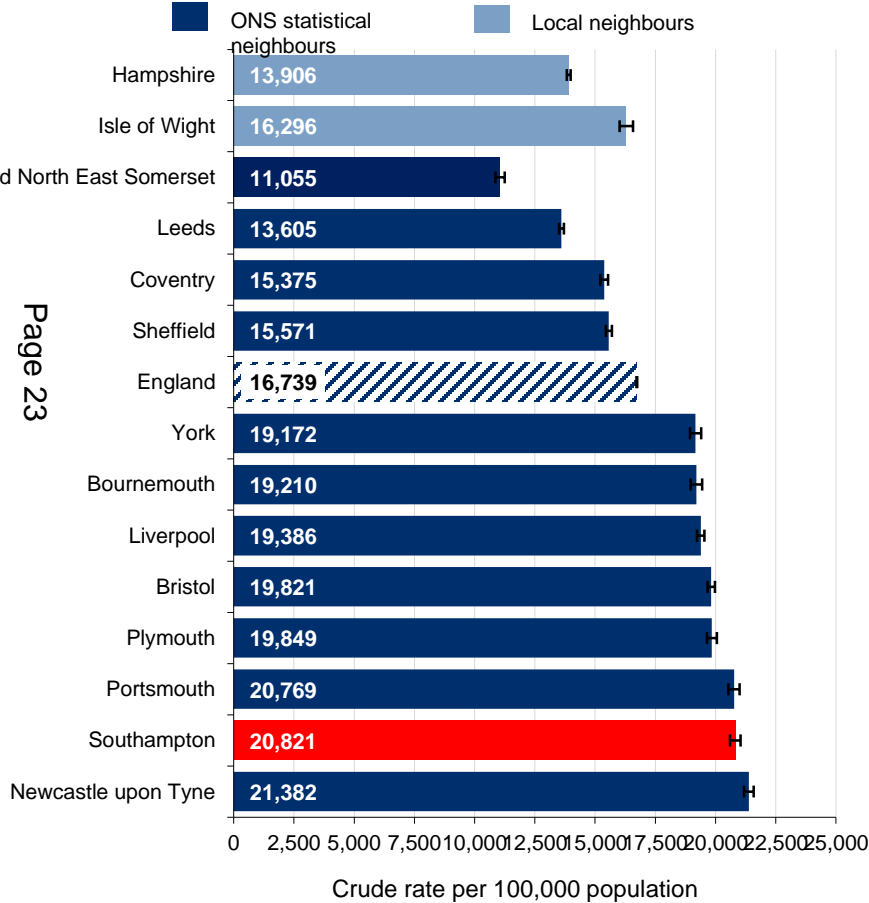
Percentage of abortions under 10 weeks gestation - Southampton and England trend: 2012 to 2017



Sources: Department of Health via Public Health England

STI Testing Rates – 25+s

STI testing rate (excluding chlamydia in under 25 year olds) among 15-64 year olds: 2017
Southampton & ONS Comparator Local Authorities



STI testing rate (excluding chlamydia in under 25 year olds) among 15-64 year olds - Southampton and England trend: 2012 to 2017

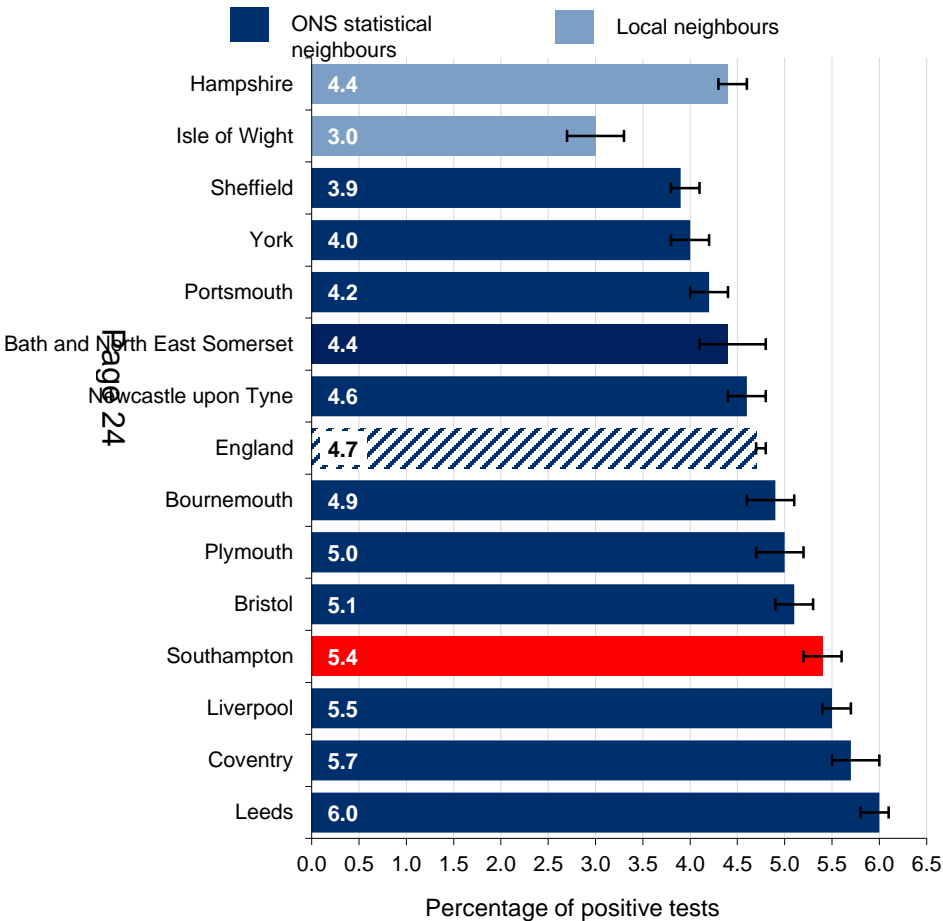


Sources: Public Health England via GUMCAD

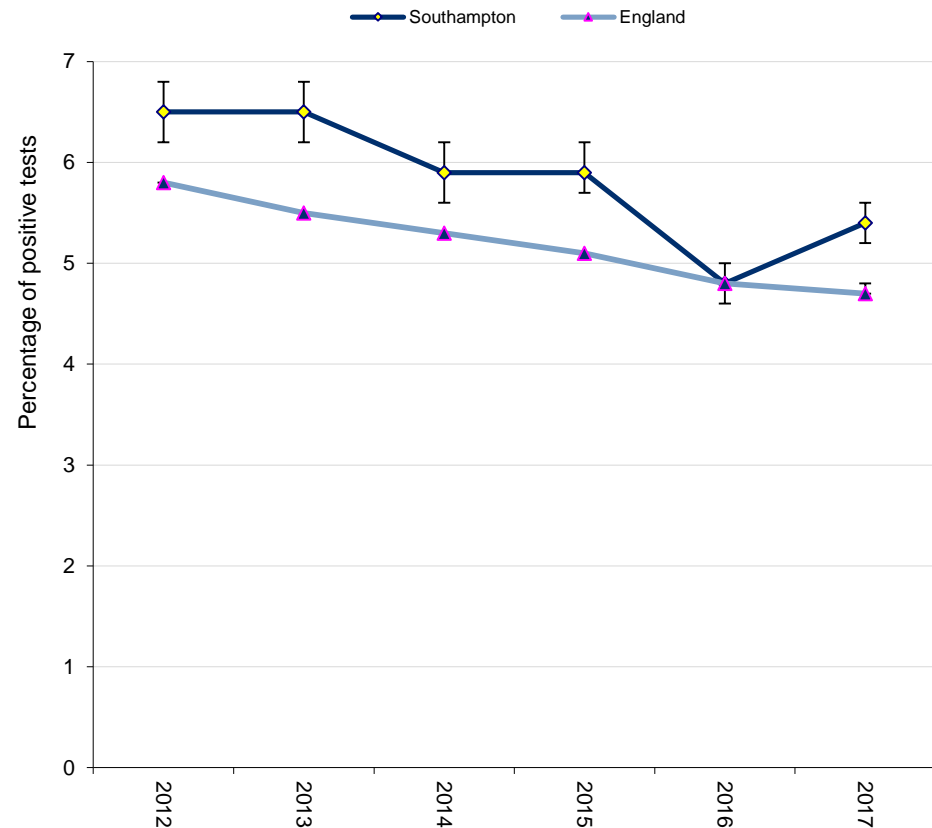
Sources: GUMCAD via Public Health

STI Testing Positivity in 25+s

STI testing positivity (excluding chlamydia in under 25 year olds) among 15-64 year olds: 2017
Southampton & ONS Comparator Local Authorities



STI testing positivity (excluding chlamydia in under 25 year olds) among 15-64 year olds - Southampton and England trend: 2012 to 2017

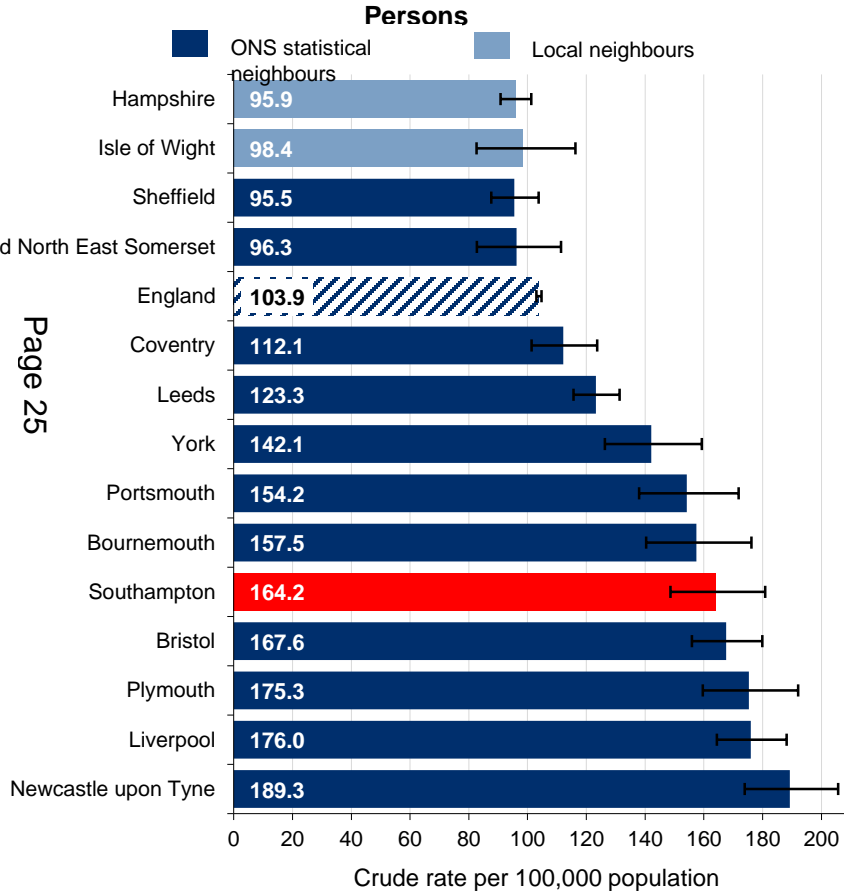


Sources: GUMCAD via Public Health

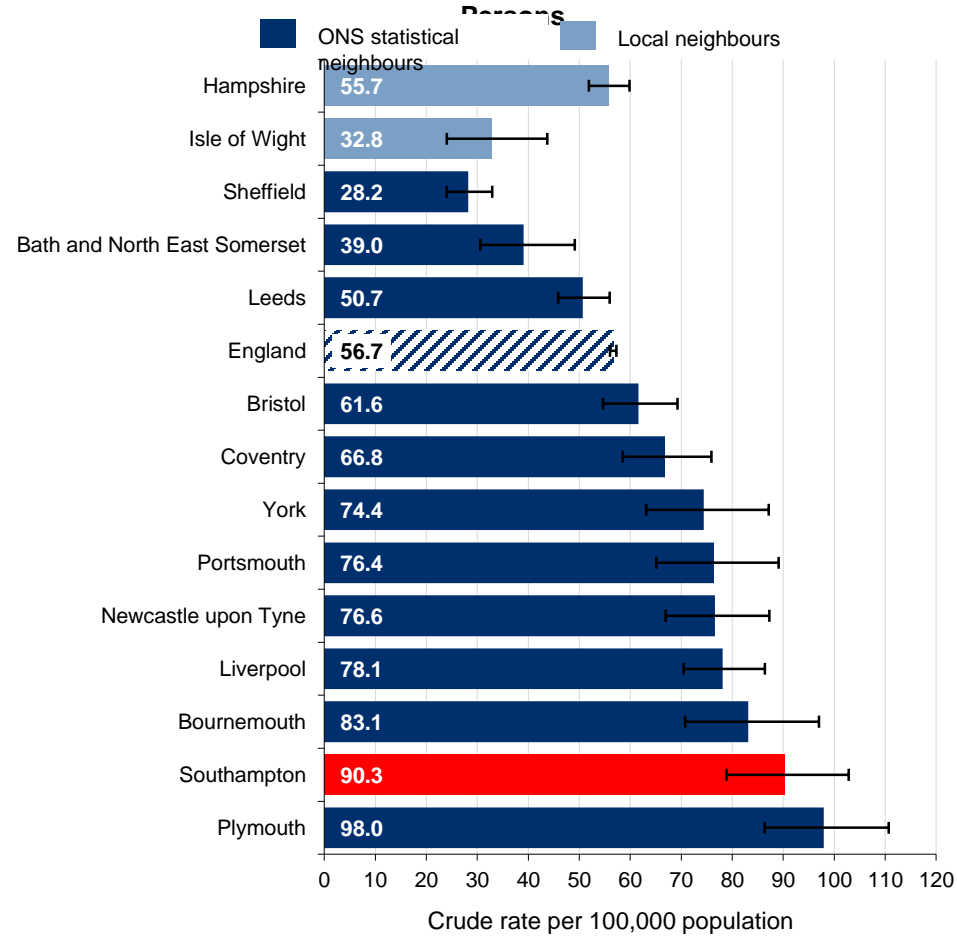
Sources: GUMCAD via Public Health

STI Variations 1 for Southampton Vs Neighbours

First episode genital warts diagnosis rate: 2017
Southampton & ONS Comparator Local Authorities:



First episode genital herpes diagnosis rate: 2017
Southampton & ONS Comparator Local Authorities:



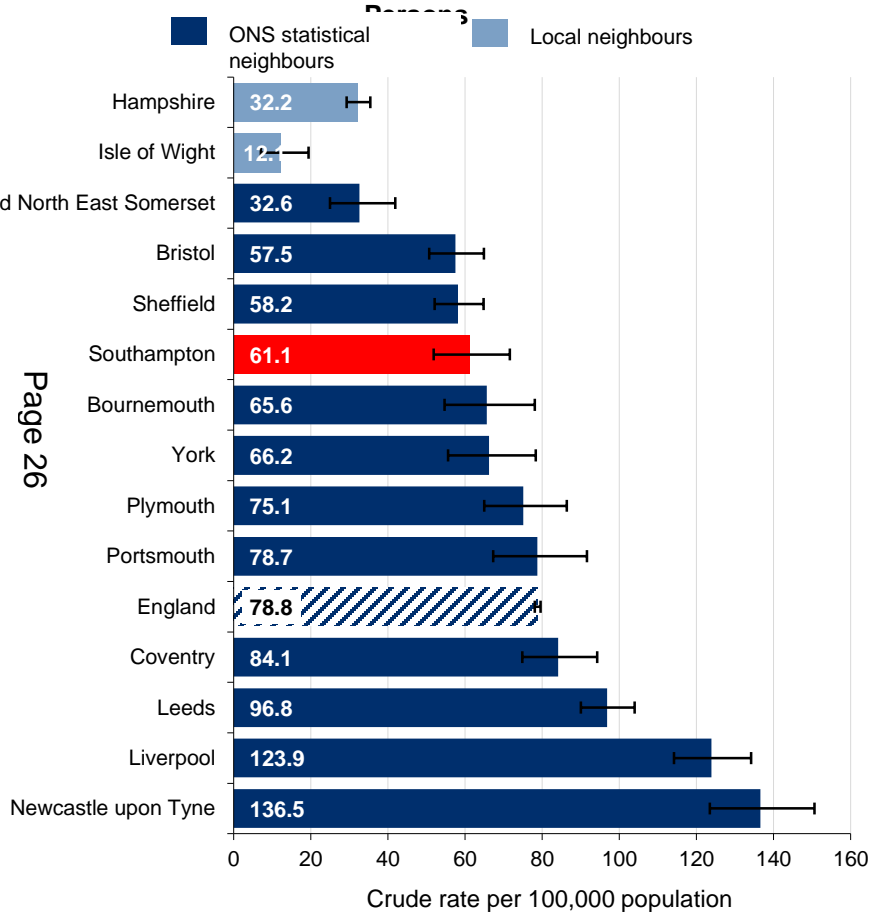
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Source: GUMCAD via Public

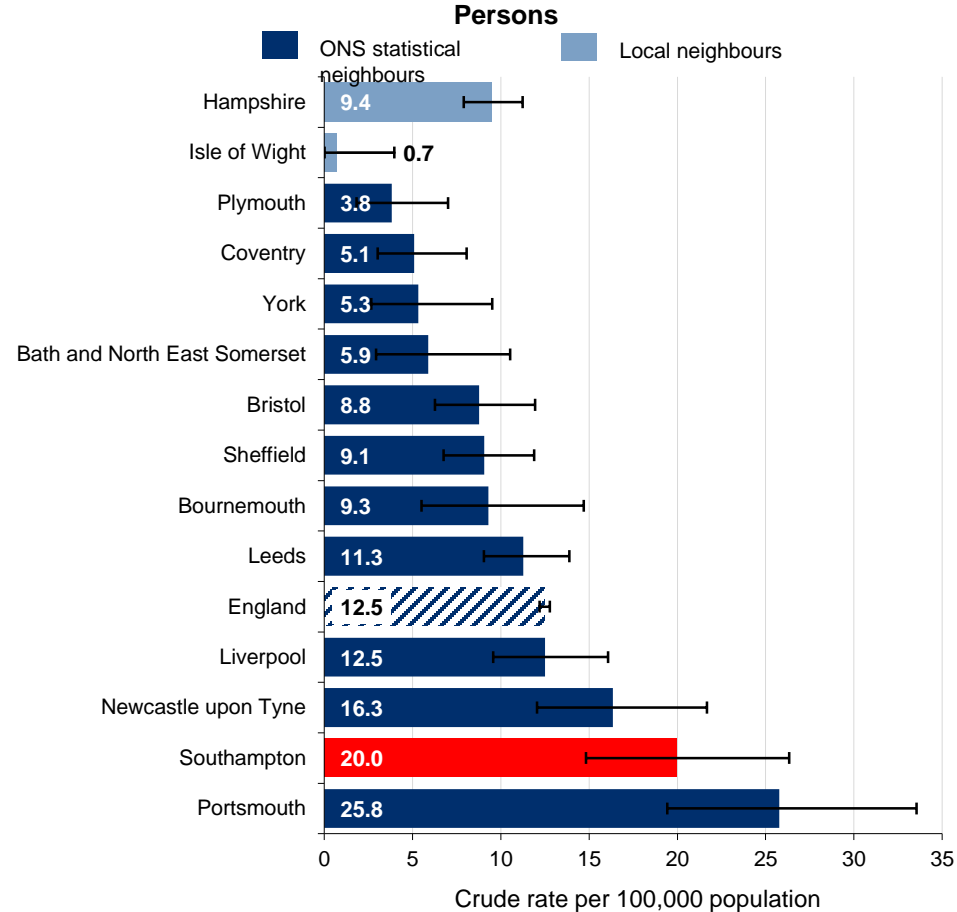
Source: GUMCAD via Public Health

STI Variations 2 for Southampton Vs Neighbours

Gonorrhoea diagnosis rate: 2017
Southampton & ONS Comparator Local Authorities:



Syphilis diagnosis rate: 2017
Southampton & ONS Comparator Local Authorities:



Source: GUMCAD via Public Health

Sources: GUMCAD via Public Health

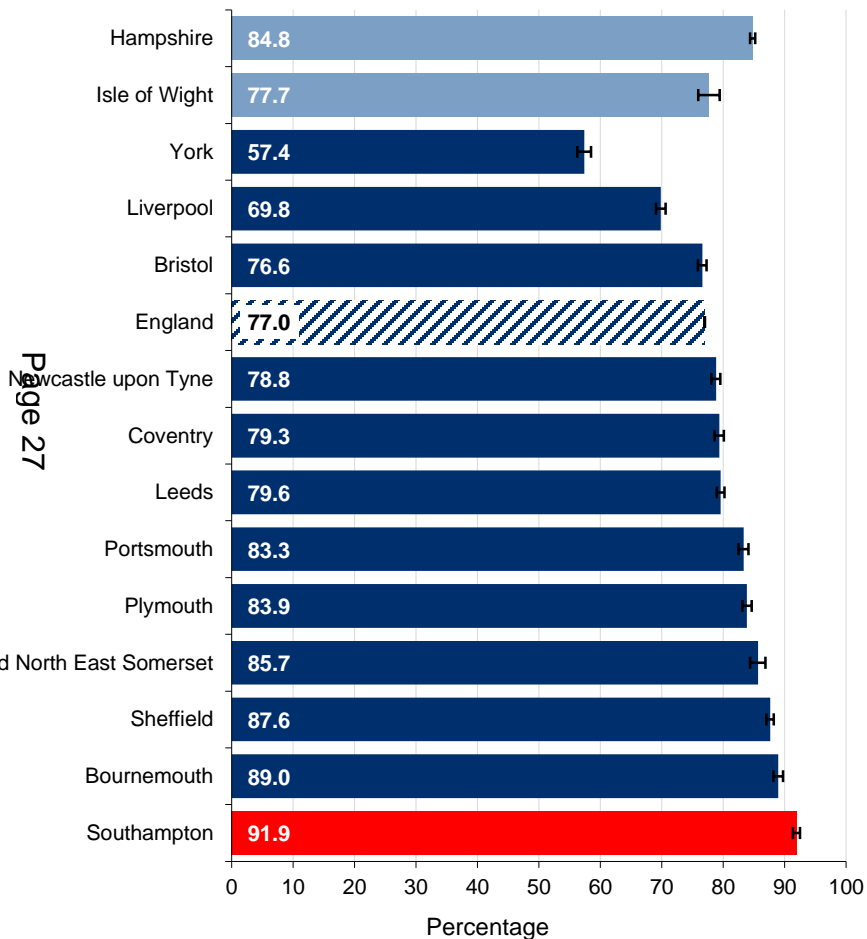
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HIV testing and detection - 1

Uptake of HIV testing in specialist sexual health services:
2017

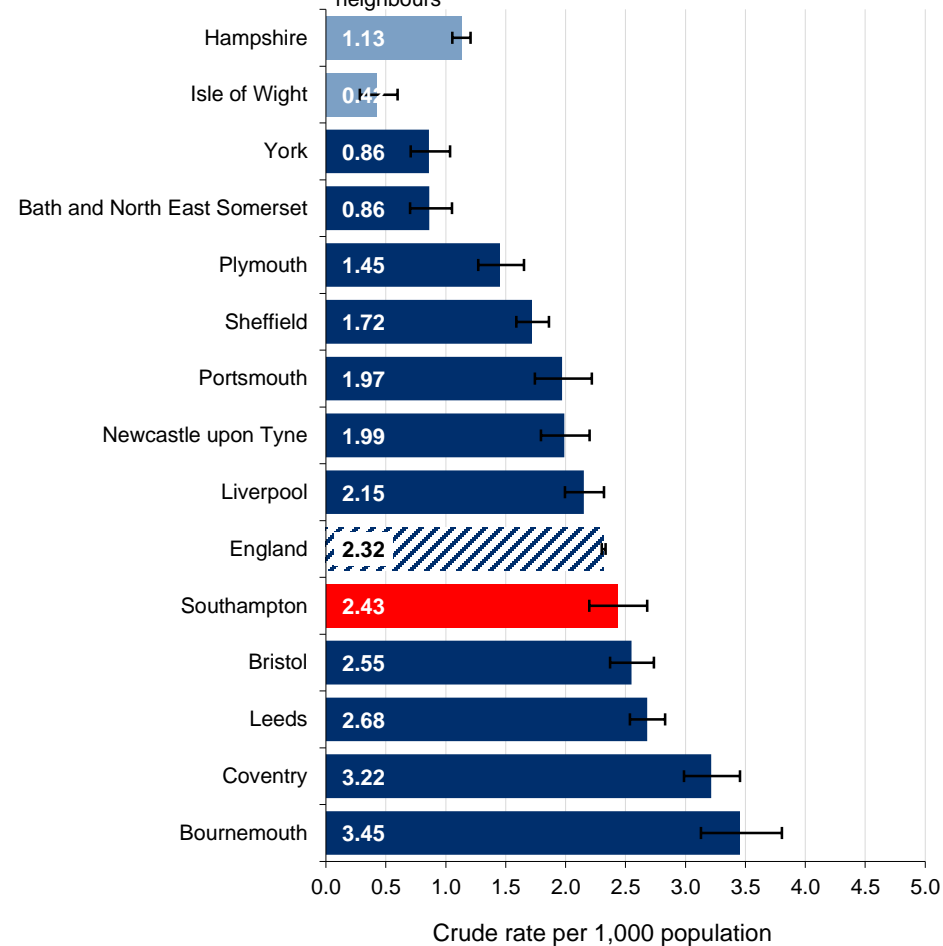
Southampton & ONS Comparator Local Authorities:

■ ONS statistical neighbours
■ Local neighbours



Prevalence of diagnosed HIV infection: 2017
Southampton & ONS Comparator Local Authorities:
Persons aged 15-59 years

■ ONS statistical neighbours
■ Local neighbours

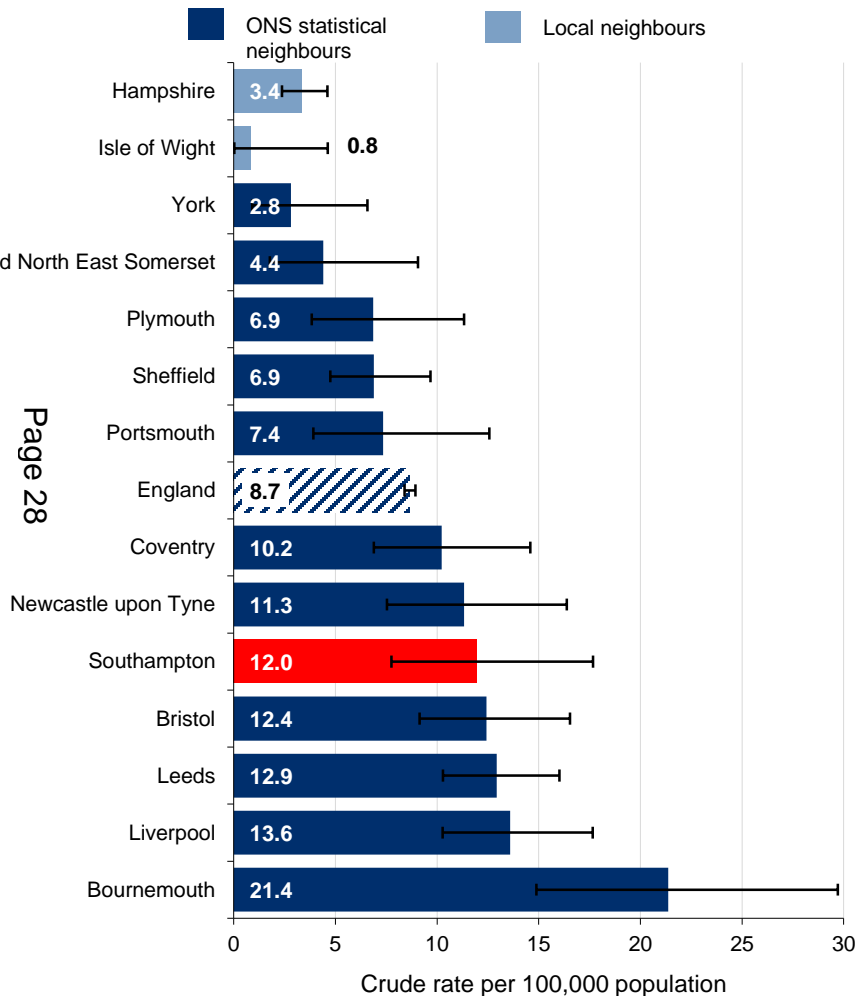


Source: GUMCAD via Public Health

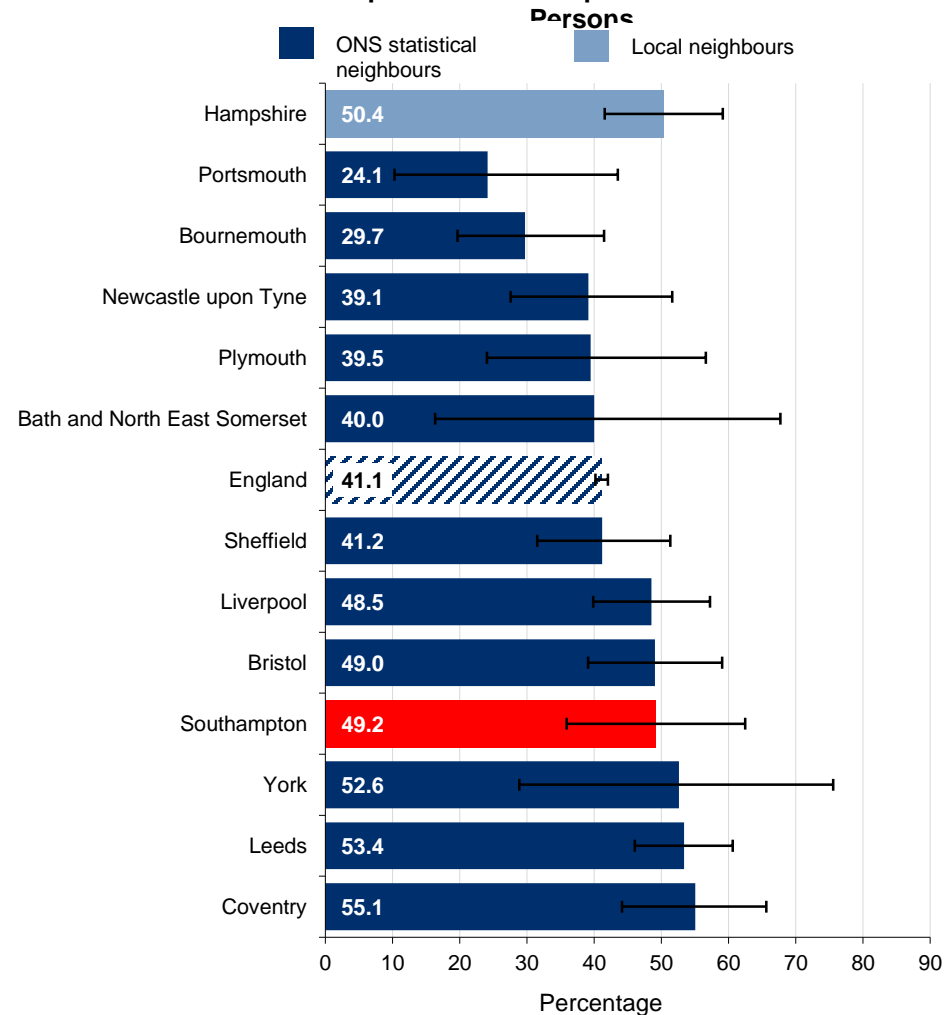
Source: Public Health England

HIV testing and detection - 2

Rate of new HIV diagnosis: 2017
Southampton & ONS Comparator Local Authorities:
Persons aged 15+ years



Late HIV diagnosis in adults aged 15+ years : 2015 - 2017
Southampton & ONS Comparator Local Authorities:

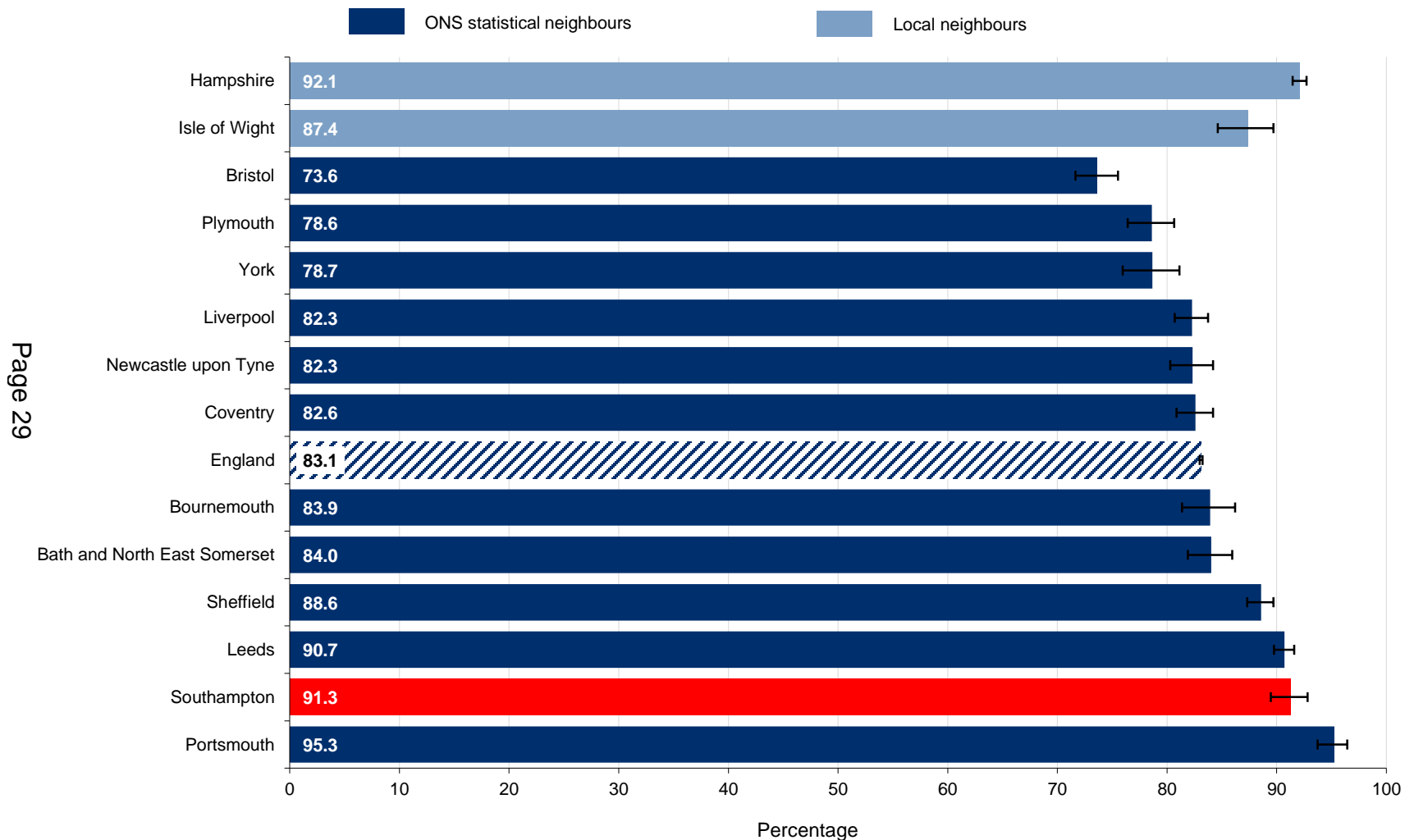


Source: HIV and AIDS Reporting System (HARS) via Public Health England

Sources: HIV and AIDS Reporting System (HARS) via Public Health

HPV Vaccination rates

HPV vaccination coverage for two doses - Females aged 13-14 years: 2016/17
Southampton & ONS Comparator Local Authorities

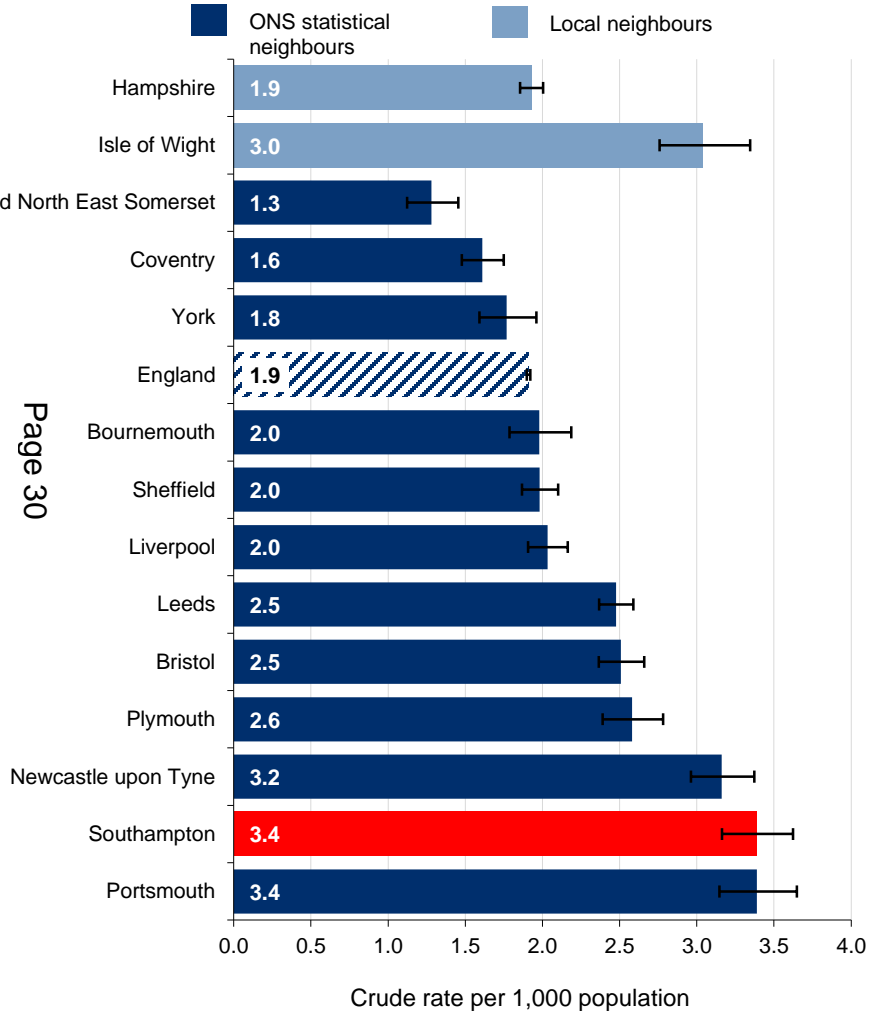


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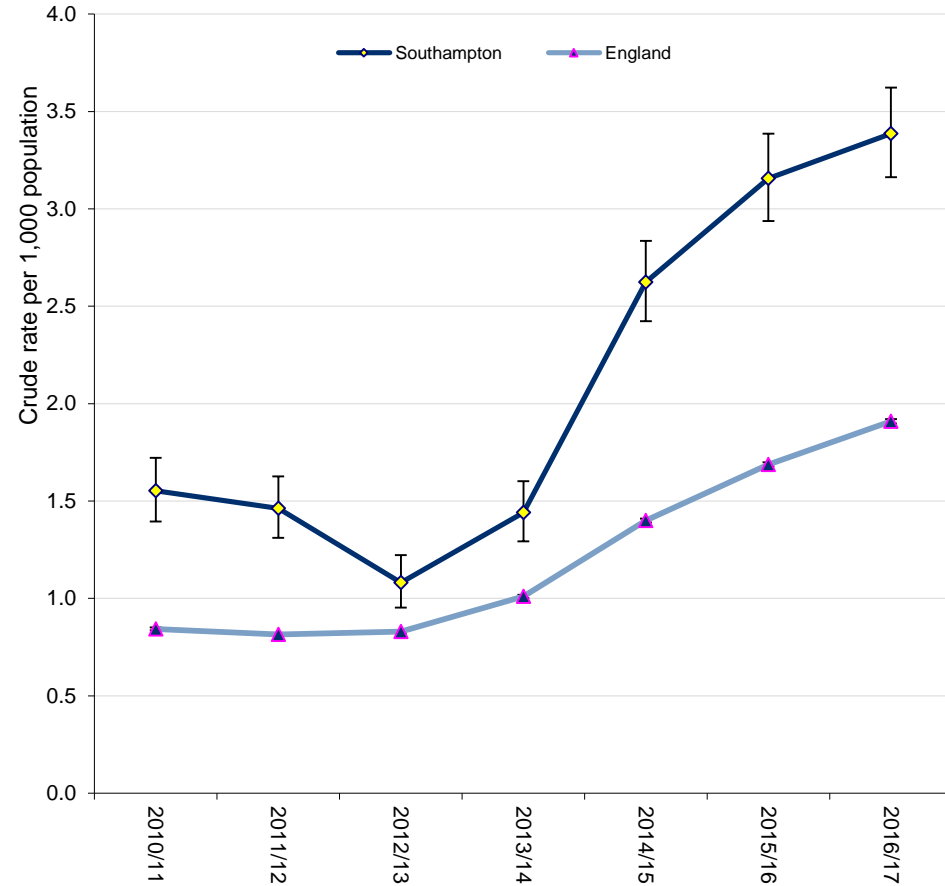
Source: Public Health England

Sexual Assault in Southampton

Rate of sexual offences: 2016/17
Southampton & ONS Comparator Local Authorities:
Persons



Rate of sexual offences - Southampton and England trend:
2010/11 to 2016/17: Persons



Sources: Home Office via Public Health

Source: Home Office via Public Health

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Current commissioned SH Services in Southampton

- **Integrated Sexual Health Service – LA Commissioned**
 - Genito-Urinary Medicine (GUM)
 - Sexually Transmitted Infection (STI) detection and treatment
 - Contraception (comprehensive)
 - Sexual Health promotion and outreach, inc. HIV prevention
 - Psycho-Sexual Health
 - Network leadership and training
- **Integrated Sexual Health Service – CCG Commissioned**
 - Terminations of pregnancy
 - Vasectomies
- **Integrated Sexual Health Service NHS England commissioned**
 - HIV Treatment

Other commissioned SH Services in Southampton

- **LA Commissioned services from general practice**
 - Long Acting Reversible Contraception (LARC)
 - Enhanced HIV screening in primary care for at risk communities
- **LA Commissioned services from community pharmacies**
 - Emergency Hormonal Contraception (EHC) for under 25s

Other LA Commissioned services for Southampton residents

- Health and Wellbeing community, school and college drop ins
- PreventX online HIV testing as part of Public Health England led national procurement
- Star Project (school / community based Relationships and Sex Education (RSE) programme as part of domestic abuse contract
- Interventions from 0-19 prevention and early help services

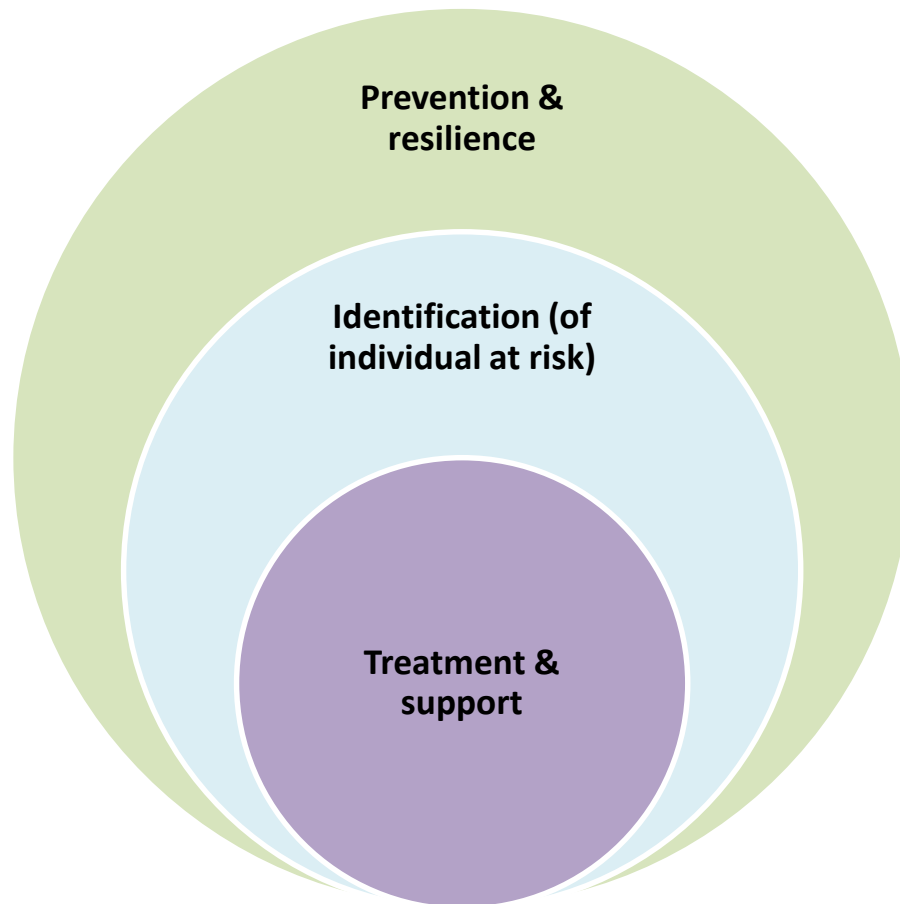
Other commissioned SH Services in Southampton

- **CCG commissioned services from general practice**
 - Contraceptive offer under GMS Contract (including EHC)
 - Symptomatic and asymptomatic screening of patients for STIs as part of normal investigative treatment
- **Other CCG commissioned SH services**
 - Antenatal screening for HIV, Hepatitis B and Syphilis in maternity
 - EHC via urgent treatment centre settings
- **Other NHSE commissioned services for Southampton residents**
 - HPV vaccination programme via school nursing
 - HIV Pre Exposure Prophylaxis PrEP pilot programme

RSH Improvement priorities – Southampton

- **Proposed approach to commissioning for the whole system**
- **Outcome focussed improvement priorities**
- **Value for money and affordability considerations**
- **Current suggested priorities for 2019-2024**

Proposed framework for Sexual Health Improvement in Southampton



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Suggested RSH Improvement Priorities – 2019-24

- **Proposed priorities 1-3:**

1. Promote a culture supporting good sexual and reproductive health for all which prioritises prevention and reduces stigma, prejudice and discrimination
2. Ensure access to services that improve sexual health is good for everyone, with no individuals or groups left behind. Services should offer early detection, effective support/treatment and reduction in onward transmission of sexually transmitted infections, including HIV
3. Women and men are supported in avoiding unplanned pregnancies, including unplanned teenage pregnancies through good access to family planning advice and a full range of contraceptive options

Suggested RSH Improvement Priorities – 2019-24

- **Proposed priorities 4-5:**

4. Safeguard and promote the welfare of those most at risk of poor outcomes including vulnerable adults, children and young people, protecting them from exploitation and abuse through fostering effective partnership between all relevant services and agencies
5. Offer sexual health services that are value for money, proportionate to level of need, provide the 'right care in the right place' and focus on prevention

Conclusion

Summary

- Reproductive and sexual health incorporates a wide range of services and communities
- Outcome inequalities are complex, but not generally unfamiliar
- Service demand is complex, linked to demography, economy, growth and diversity of the City
- Control of reproductive health a major contributor to economic wellbeing, engagement and demand for services linked to child poverty

Further information

For more information on reproductive and sexual health in Southampton

- JSNA – comprehensive collection of local data:
http://www.publichealth.southampton.gov.uk/healthintelligence/jsna/takingres_sexualhealth.aspx?tab=tcm:62-353499
- PHE Fingertips tool – sexual health profiles:
<https://fingertips.phe.org.uk/profile/sexualhealth>
- Local services
 - Solent NHS Trust: <https://www.letstalkaboutit.nhs.uk/>
 - Southampton Primary Care Ltd:
<http://www.southamptonprimarycare.org.uk/>
 - No Limits Help: <https://nolimitshelp.org.uk/get-help/relationships-sexual-health-sexuality/>

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