Bath & North East Somerset Council		
MEETING	Council	
MEETING DATE:	11 th September 2014	
TITLE:	Referral from Wellbeing Policy Development & Scrutiny Panel - "Halve It" HIV campaign	
WARD:	All	
AN OPEN PUBLIC ITEM		
List of attachments to this report:		
No attachments		

1 THE ISSUE

Following a presentation to the Wellbeing Policy Development and Scrutiny Panel on 25th July 2014 regarding the prevalence of, and related issues to, HIV infection in Bath and North East Somerset, the Panel resolved to ask Council to sign up to the *Halve It* campaign to reduce the proportion of people undiagnosed, or diagnosed late with HIV, through policy reform and good practice.

2 RECOMMENDATION

2.1 Council is asked to sign up to the Halve It campaign to reduce the proportion of people undiagnosed, or diagnosed late with HIV, through policy reform and good practice

3 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

3.1 There are no additional resource implications identified by the actions detailed.

4 STATUTORY CONSIDERATIONS AND BASIS FOR PROPOSAL

4.1 Human Immunodeficiency Virus (HIV) is an infection, which, without treatment, can result in progressive increase in illness and premature death. The main routes of transmission of HIV are via sex without a condom, using contaminated

injecting equipment and from transmission from mother to baby during pregnancy, birth or breastfeeding. Around 25% of people living with HIV are not yet aware they are infected. Symptoms following infection do not always occur and can be general, meaning there is potential for infected people to transmit the virus unknowingly to others.

4.2 The public health department is responsible for detailing progress against the reducing late HIV diagnoses indicator as defined in the *Public Health Outcomes Framework*.

5 THE REPORT

- 5.1 At the end of 2011, there were almost 100,000 people estimated to be living with HIV in the UK. As a result of advancement in drug therapies people diagnosed with HIV are increasingly "living with" the infection, rather than dying as a result of it. Just under half (49.7%) of those newly diagnosed with HIV in England were diagnosed late defined at having a CD4 count below 350 cells/mm³ within 90 days of diagnosis. People diagnosed late have a eleven-fold increased risk of death within one year of HIV diagnosis compared to those diagnosed promptly (3.8% vs. 0.35%).
- 5.2 Halve It is a group working with government and the NHS to reduce the proportion of people undiagnosed, and diagnosed late, with HIV through policy reform and good practice. Its membership includes the All Party Parliamentary Group on HIV and AIDS, the British Association of Sexual Health and HIV (BASHH), The Royal College of Physicians (RCP), National AIDS Trust (NAT), Terrence Higgins Trust (THT), and Gilead.
- 5.3 *Halve It* has the following two goals:
 - To halve the proportion of people diagnosed late with HIV (defined as having a CD4 count < 350mm3 within three months of diagnosis) by 2015
 - To halve the proportion of people living with undiagnosed HIV by 2015
- 5.4 In addition, *Halve It* is asking for the following actions to be taken:
 - For National Institute for Health and Care Excellent (NICE) public health guidance on HIV testing to be implemented
 - To ensure that local health organisations understand the importance and benefits of early HIV detection by supporting the *Public Health Outcomes* Framework indicator on HIV
 - To offer incentives to test for HIV is a range of healthcare settings To ensure those diagnosed with HIV have access to anti-retroviral therapy (ART) to prevent onwards transmission of HIV
 - To ensure quality assured self-testing kits for HIV, when available, are integrated into local HIV testing strategies

6 RATIONALE

- 6.1 In 2012 there were approximately 70 people living in Bath and North East Somerset (BaNES) diagnosed with HIV and receiving treatment and/or care. This makes our diagnosed HIV prevalence per 1,000 population aged 15-59 a rate of 0.6. This rate is one of the lowest in the country, with just 10 local authorities having a lower rate.
- 6.2 Between 2010 and 2012 approximately 50% of persons diagnosed with HIV in BaNES were diagnosed late. This is similar to the South West average of 49.3% and the England average of 49.7%.
- 6.3 Although BaNES is a low prevalence area for HIV we are already undertaking a range of actions to help local implementation of the *Halve It* programme, specifically:
 - The local Sexual Health Board has recently been re-established and will support the undertaking of a rapid sexual health needs assessment ensuring its key focus is on making progress against the *Public Health Outcomes* Framework targets. This will include measures to reduce the numbers of people diagnosed late with HIV.
 - The local Sexual Health Board is in the process of developing a local strategy
 to increase the uptake of HIV testing particularly amongst the most vulnerable
 groups such as men who have sex with men (MSM), This will include analysing
 data from current service providers, working with local voluntary sector
 providers and taking the views of those within the cohort to help meet need
 - Our service specifications have been revised to ensure that HIV testing is now
 offered as a core intervention from mainstream sexual health services
 commissioned by the council. Currently 88% of BaNES residents who access a
 sexual health service are offered a HIV test with 76% subsequently accepting
 that test, compared to a South West regional average of 80% and 62%
 respectively (PHE 2013); we are seeking to increase this rate during 2014/15
 - We are examining ways in which we can roll out point of care (PoC) HIV testing in collaboration with voluntary sector providers to enable self-testing. This measure will complement existing HIV testing already in place
 - We are working with colleagues from BaNES Clinical Commissioning Group (CCG) during 2014/15 to examine opportunities to increase the level of HIV testing delivered through primary care settings, in addition to PoC testing as detailed above
- 6.4 The Panel resolved to ask Council to sign up to the *Halve It* campaign to reduce the proportion of people undiagnosed, or diagnosed late with HIV, through policy reform and good practice.

7 OTHER OPTIONS CONSIDERED

7.1 None

8 CONSULTATION

8.1 This motion has been proposed following an update on HIV infection in Bath and North East Somerset presented to Wellbeing Policy Development and Scrutiny Panel in July 2014. We provided an update to the panel on HIV infection and prevalence in Bath and North East Somerset, explaining the aims of the Halve It campaign, detailing actions already underway that were in line with the campaign aims. The Chair of the Panel and Cabinet Member have been consulted in preparing this report.

9 RISK MANAGEMENT

9.1 A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision making risk management guidance.

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Background papers	DH (2013), <i>Public Health Outcomes Framework</i> , Department of Health, London; available at: https://www.gov.uk/government/publications/healthy-lives-healthy-people-improving-outcomes-and-supporting-transparency Halve It Coalition (2013), <i>Early Testing Saves Lives</i> , Halve It
	Coalition, London available at: www.bhiva.org/documents/Publications/Halve it Position Paper.pdf

NAT (2012), *HIV: A Strategy for Success*, National AIDS Trust, London; available at:

www.nat.org.uk/media/Files/Publications/Oct-2012-HIV-a-strategy-for-success.pdf

PHE (2013), Sexual Health Quarterly Outcome Indicator Report, Public Health England, Bristol; **NB: as this report contains** patient identifiable data it is not available in the public domain

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