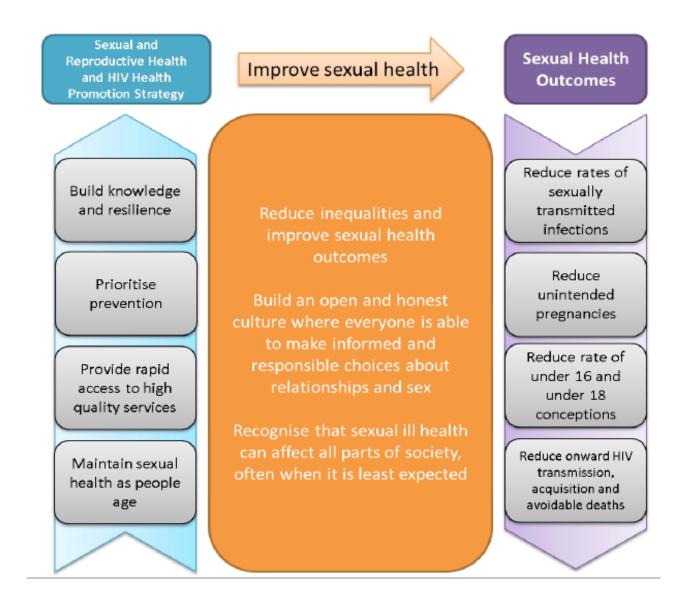
# Sexual & Reproductive Health in Berkshire East

Jo Jefferies Consultant in Public Health Berkshire Shared Public Health Team



<u>A Framework for Sexual Health Improvement in England (DoH, 2013)</u>

# **Current national picture**

- Rates of sexual transmitted infections have remained stable since 2016. There has been a reduction in the number of young people being screened for chlamydia and a reduction in chlamydia diagnoses but rates of syphilis and gonorrhoea continue to rise<sup>1</sup>
- The total number of attendances at Sexual Health services nationally increased 3% between 2016 and 2017 (from 3,227,254 to 3,323,275), continuing the increasing trend over the past five years; there has been a 13% increase in the number of attendances since 2013<sup>1</sup>
- The impact of STIs remains greatest in young heterosexuals 15 to 24 years; black ethnic minorities; and gay, bisexual and other men who have sex with men (MSM)
- It is estimated that around 16% of all pregnancies are unplanned<sup>2</sup>
- Teenagers have the highest rate of unplanned pregnancy and around half of under-18s conceptions end in abortion
- Oral contraception is the most commonly recorded method among women accessing specialist services(44% in 2016)<sup>3</sup>
- The proportion of women using long acting reversible contraceptives has been increasing over the last ten years (39% in 2016)<sup>3</sup>
- The number of emergency contraception items provided to females by both SRH services and at other locations in the community has fallen by 42%<sup>1</sup> over the last ten years<sup>3</sup>

1. Sexually transmitted infections and screening for chlamydia in England, 2017 (PHE), 2. Third National Survey of Sexual Attitudes and Lifestyles (NATSAL-3), 3. Sexual and Reproductive Health Services, England - 2016-17

# **Service Objectives**

- Prevention, timely treatment and follow up of new STIs
- Prevention and reduced late diagnosis of HIV increasing uptake of HIV testing in high risk groups, working to reduce the proportion of HIV infections that are diagnosed late, participation in PrEP impact trial
- Access to choice of contraception and reduce unwanted pregnancies by promoting and increasing the proportion of the most effective and reliable forms of long term contraception (LARC) among women accessing contraception
- Reduced inequalities in sexual and reproductive health
- Increased access to sexual health through use of digital technology including access to online HIV and STI testing for all adult residents of Berkshire East
- Promotion of better health and wellbeing linking with other services, such as drug and alcohol services and domestic violence services
- Help address the wider social determinants of sexual ill health
- Improving self-care for sexual and reproductive health needs where appropriate

#### **Self-Care**

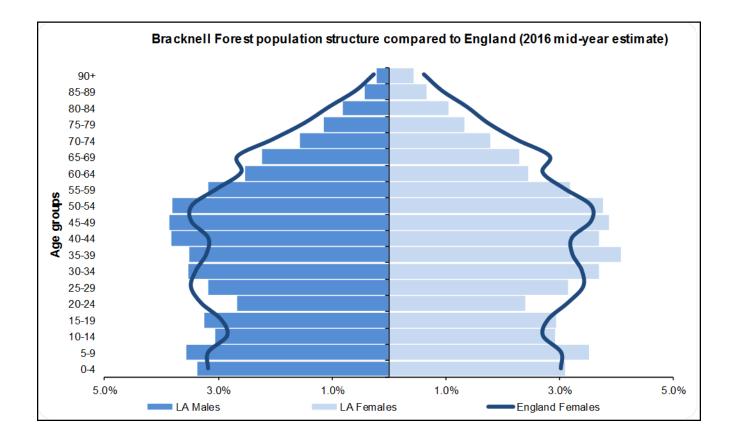
As a primary prevention initiative to improve the overall sexual health of the community, access to generic information on pregnancy, the range of contraceptive methods available, STIs including HIV, and safer sex advice should be made available to Service Users and the public beyond consultations with a health practitioner, through the Safe Sex Berkshire website and other communications channels.

In clinic-based services, users of all ages should be encouraged to self-manage, without the need for a healthcare practitioner wherever appropriate -although clinical support must be on hand if needed

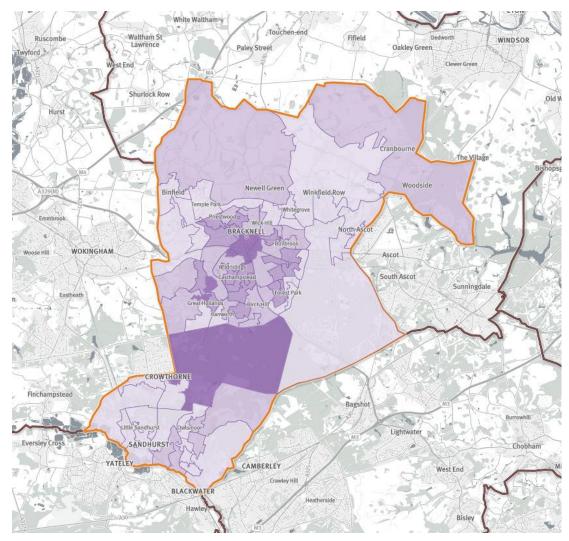
- The service will offer **online STI testing / self-sampling services** as part of the self-care pathway.
- Other services which enable Service Users to access services through use of digital technology are strongly encouraged, this includes online appointment booking, online or text chat function for sexual and reproductive health queries, ordering of repeat contraception and certain antibiotic treatment online.
- Examples of other self-managed healthcare services are use of condom distribution schemes (where available); collection point for condoms, dams and lubricants; use of pregnancy testing kits as part of pathways of care; collection point and / or on-site self-sampling for STIs and HIV, linked to the online STI testing and HIV self-sampling service(s).
- Innovations such as **postal treatment** for uncomplicated genital infections may also be considered where clinically indicated.
- Innovation to support Service Users to access repeat contraception without the need to attend clinic in person is also strongly encouraged

#### **BRACKNELL FOREST**

# Demographics



# Deprivation

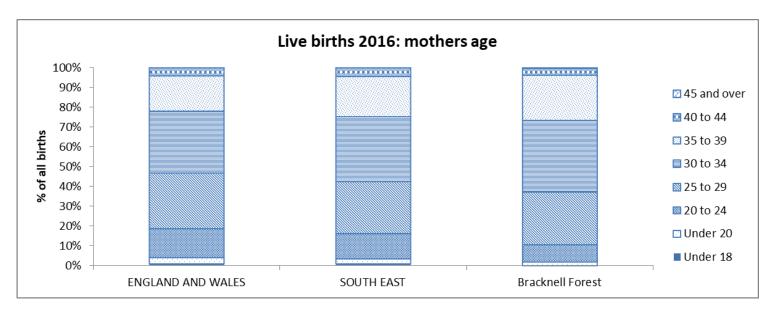


Values for LSOAs within the selected boundary are shown.

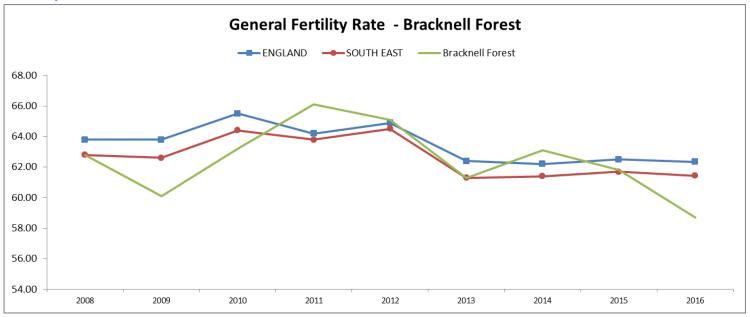
The colours represent the quintiles:

33.89 to 92.6 21.44 to 33.88 13.93 to 21.43 8.38 to 13.92 0.48 to 8.37

Source: English Indices of Deprivation 2015 from Public Health England's SHAPE Atlas



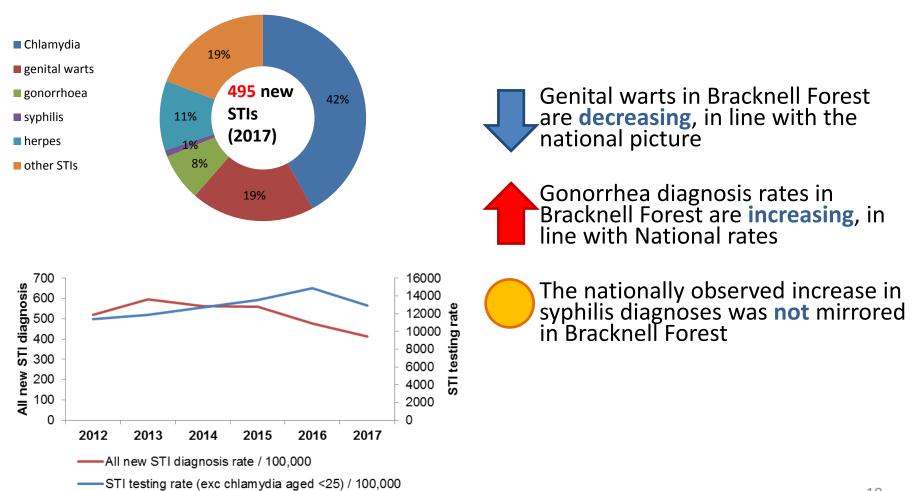
Births by mothers usual area of residence, Office for National Statistics



Measures from the Public Health Outcomes Framework, NHS Digital

#### **Key outcomes – STIs**

**413** new STIs per 100,000 residents; lower than the England rate of 743 per 100,000



Source: Fingertips Sexual & Reproductive Health Profiles

#### **Key outcomes – HIV**



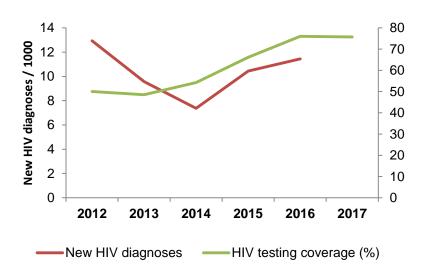
**11.5 new HIV infections** per 100,000; similar to the England rate of 10.5/1000



**113 people living with HIV** a rate of **1.54** per 1000 15-59 year olds; lower than the England rate of 2.31/1000



HIV testing coverage was 75.7%, higher than the England rate of 65.7%



**60%** of new HIV diagnoses in were made at a **late stage of infection**, higher than the England rate of 40.1%\*

#### **Key outcomes – reproductive health**



**70.7 conceptions** per 1000; similar to the England rate of 77.5/1000<sup>1</sup>

8.3 under 18 conceptions per 1000 lower than the England rate of 18.8/100,000

**57.9%** of all under 18 conceptions ended in abortion\* similar to the England rate of 51.8%

A total **abortion rate** of **14.0** per 1000 women lower than the England rate of 16.7/1000 

 45

 40

 35

 30

 900

 15

 10

 5

 0

 Total prescribed

 LARC excluding

 injections rate / 1,000

 GP prescribed LARC

 excluding injections

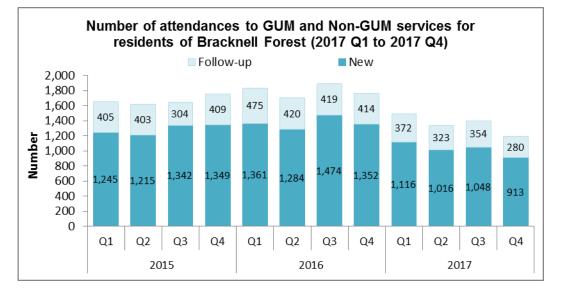
 rate / 1,000

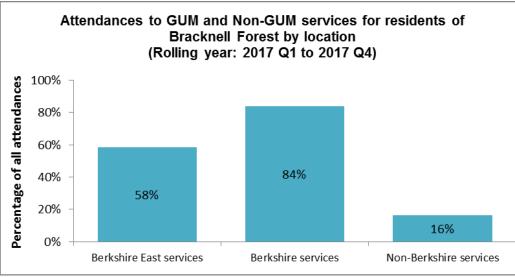
**971 total prescribed LARC** a rate of **40.8** per 1000 15-45 year old women; lower than the England

rate of 46.4/1000<sup>2</sup>



#### **Clinic attendances - GUMCAD**





Bracknell Forest residents made **5442** attendances at sexual health services for STI related care in 2017

67% of these were within Bracknell Forest and 84% were within Berkshire

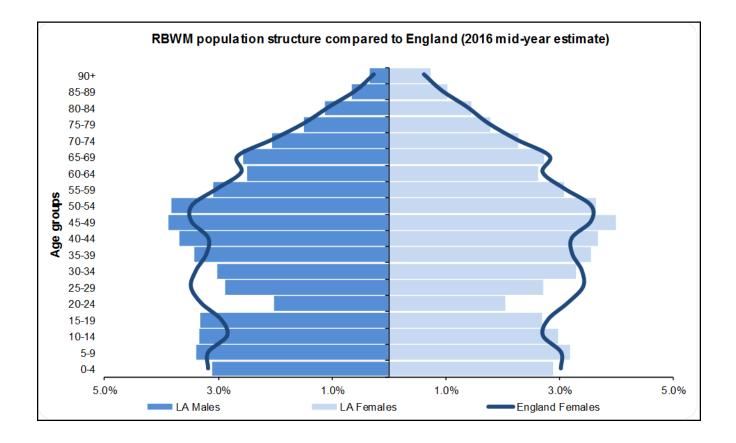
Bracknell Forest residents also attended services in Surrey Heath, Aldershot, Basingstoke and Guildford\*

# Proposed service model – Bracknell Forest

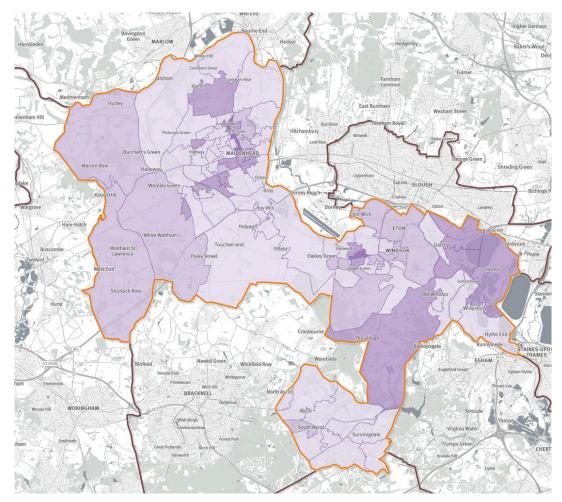
- Community-based services in Bracknell Forest will provide open access core (level1) and non-specialist (level 2) sexual and reproductive health services in a location within Bracknell town centre with good public transport links providing good access to the general community and focus also on reaching under-served, disadvantaged or high risk groups
- The Service will operate for at least 14 hours a week over at least two days with at least 2 hours of that time being used to run a young people's drop-in clinic
- The Service must provide evening opening hours on at least one evening a week as part of the total clinic time
- Bracknell Forest residents will have access to specialist services at the Level 3 Centre in Slough (to be provided at least 29.5 hours per week) and may also access the open access services in RBWM and Slough
- A Specialist Outreach Nurse service delivering an intensive, responsive contraceptive and sexual health service targeting women who have already had a child or children removed from their care, those who have been identified by Children's Social Care (CSC) as being at high risk of losing a child from their care or those in "at risk" groups who are pregnant or at risk of an unwanted pregnancy
- The Outreach Nurse will operate for 3 days per week or equivalent

# ROYAL BOROUGH OF WINDSOR & MAIDENHEAD

# Demographics



# Deprivation

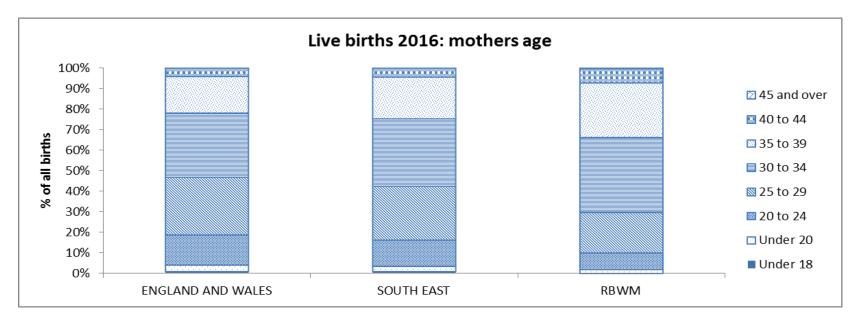


Values for LSOAs within the selected boundary are shown.

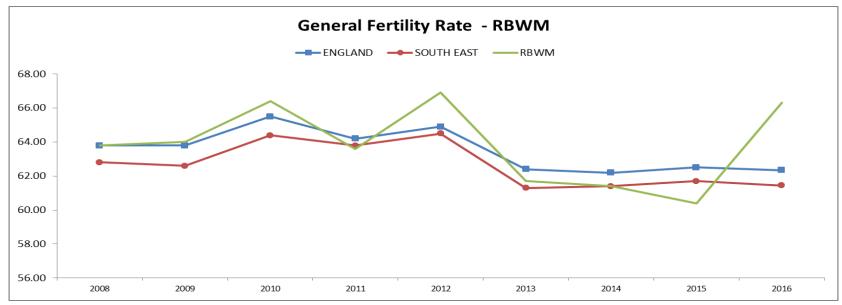
The colours represent the quintiles:

33.89 to 92.6 21.44 to 33.88 13.93 to 21.43 8.38 to 13.92 0.48 to 8.37

Source: English Indices of Deprivation 2015 from Public Health England's SHAPE Atlas



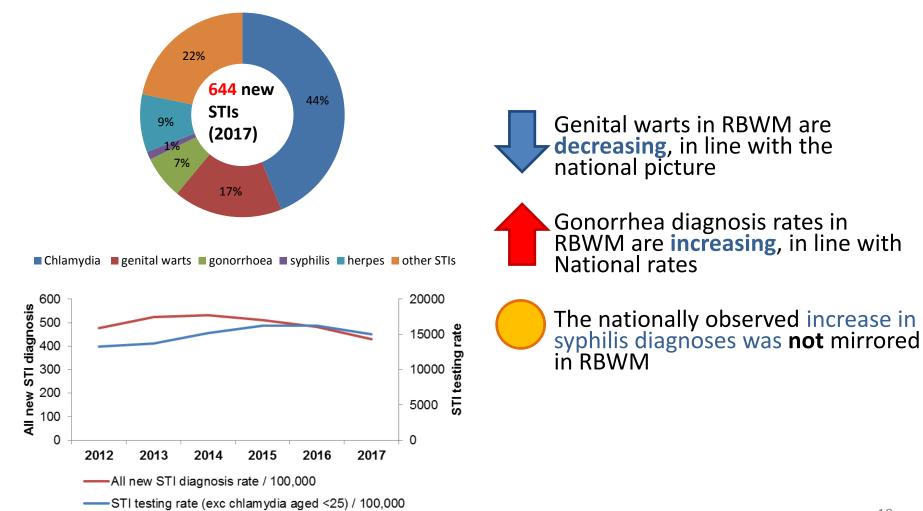
Births by mothers usual area of residence, Office for National Statistics



Measures from the Public Health Outcomes Framework, NHS Digital

#### Key outcomes – STIs

**430** new STIs per 100,000 residents; lower than the England rate of 743 per 100,000



#### **Key outcomes – HIV**



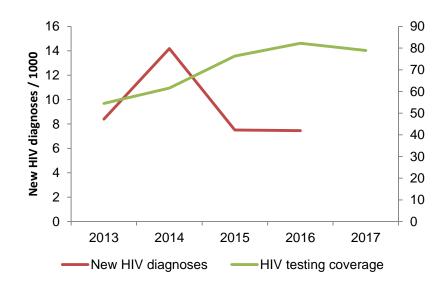
**11.5 new HIV infections** per 100,000; similar to the England rate of 10.5/1000



**113 people living with HIV** a rate of **1.54** per 1000 15-59 year olds; lower than the England rate of 2.31/1000



HIV testing coverage was **75.7%**, higher than the England rate of 65.7%



**60%** of new HIV diagnoses in were made at a **late stage of infection**, higher than the England rate of 40.1%\*

#### **Key outcomes – reproductive health**



**75.5 conceptions** per 1000; similar to the England rate of 77.5/1000

**12.2 under 18 conceptions** per 1000 lower than the England rate of 18.8/1000

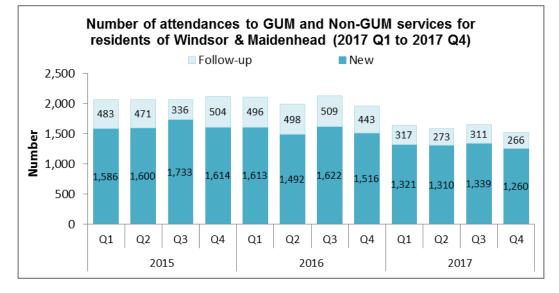
**52.2%** of all under 18 conceptions ended in abortion\* similar to the England figure of 51.8%

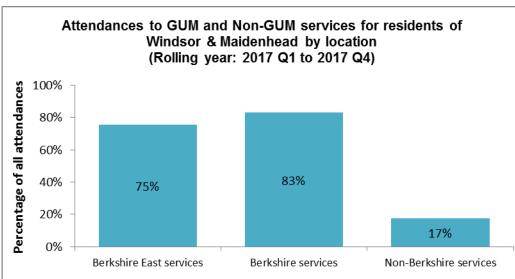
A total **abortion rate** of **14.1** per 1000 women lower than the England rate of 16.7/1000

1292 total prescribed LARC a rate

of **48.7** per 1000 15-45 year old women; similar to the England rate of 46.4/1000

#### **Clinic attendances - GUMCAD**





RBWM residents made 6413 attendances at sexual health services for STI-related care in 2017

5% of these were within RBWM and 83% were within Berkshire

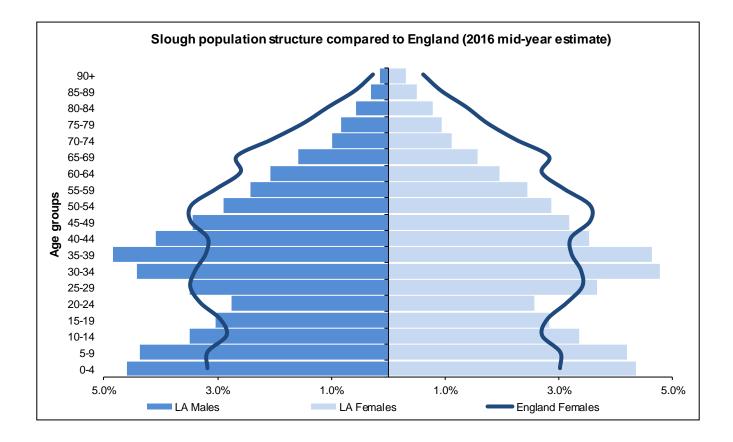
RBWM residents also attended services in Wycombe, Runnymede and various London clinics\*

# **Proposed service model - RBWM**

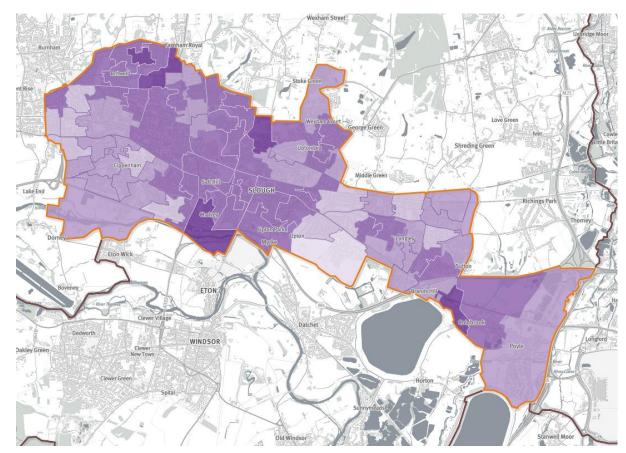
- Open access core (level1) and non-specialist (level 2) reproductive and sexual health services will be provided through a community-based nurse-led service in RBWM. The service will operate on a community outreach basis, using clinically appropriate premises at locations across the borough, including but not restricted to premises in Maidenhead, Windsor and Ascot. The service will have access to clinically appropriate RBWM buildings and some GP practices. Any location would require agreement from the RBWM Commissioner.
- This service will offer an intensive, responsive contraceptive and sexual health service and will have good access to the general community and focus also on reaching vulnerable groups who may have complex needs that impact on their risk of sexual ill health, under-served, disadvantaged or hard to reach groups and others at risk of sexual ill health including young people, BAME groups and MSM.
- The service will operate for at least 37 hours a week on a flexible basis including some evening and Saturdays.
- RBWM residents will have access to services at the Specialist (level 3) Centre in Slough (to be provided at least 29.5 hours per week) and may also access the open access non-specialist (level 2) services in Bracknell Forest.

### SLOUGH

# Demographics



# Deprivation



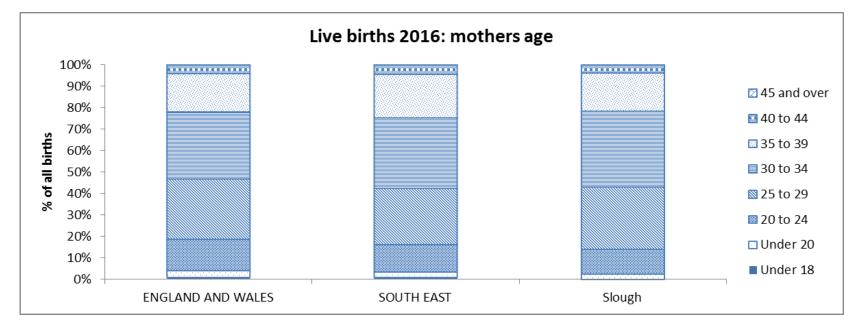
#### Key

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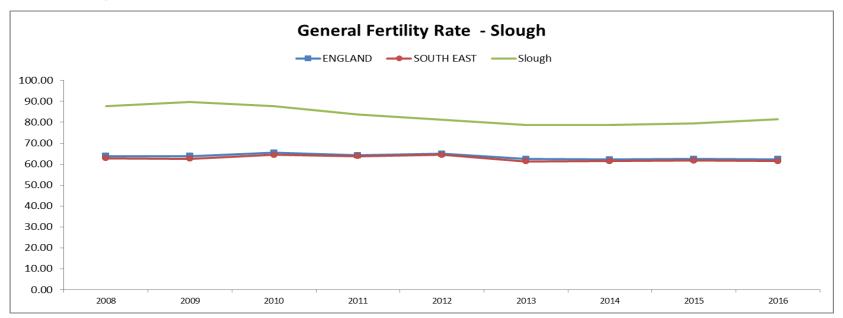
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Source: English Indices of Deprivation 2015 from Public Health England's SHAPE Atlas



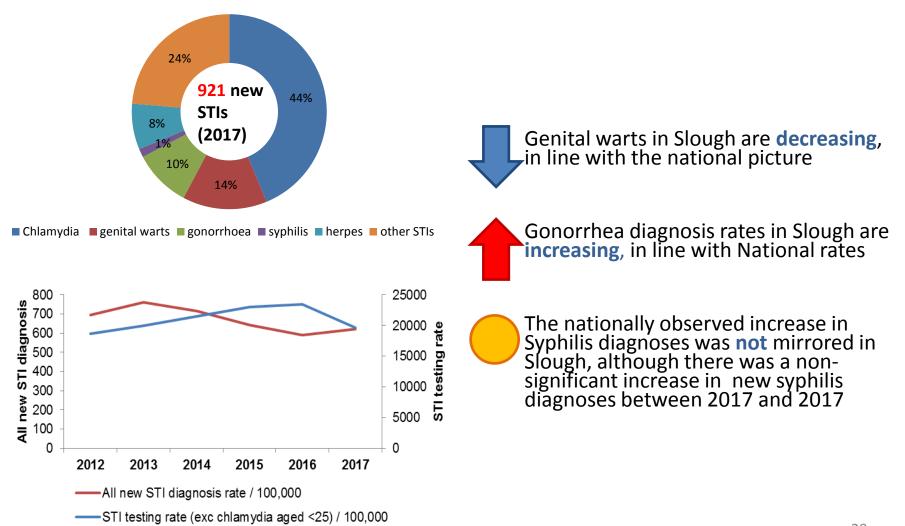
Births by mothers usual area of residence, Office for National Statistics



Measures from the Public Health Outcomes Framework, NHS Digital

#### Key outcomes – STIs

623 new STIs per 100,000 residents; lower than the England rate of 743 per 100,000



#### **Key outcomes – HIV**



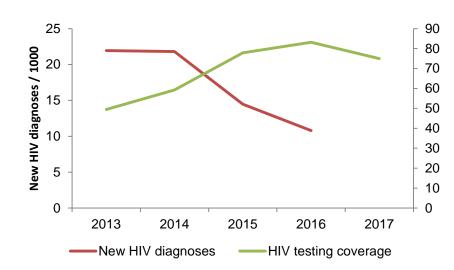
**10.8 new HIV infections** per 100,000; similar to the England rate of 10.5/1000



**304 people living with HIV** a rate of **3.34** per 1000 15-59 year olds; higher than the England rate of 2.31/1000



HIV testing coverage was **75.0%**, higher than the England rate of 65.7%



**53.7%** of new HIV diagnoses in were made at a **late stage of infection**, higher than the England rate of 40.1%\*

#### **Key outcomes – reproductive health**



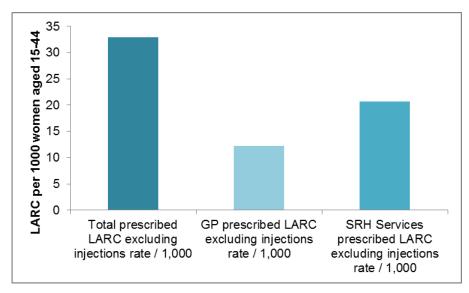
**100.4 conceptions** per 100,000; similar to the England rate of 77.5/1000

**12.2 under 18 conceptions** per 100,000 lower than the England rate of 18.8/1000

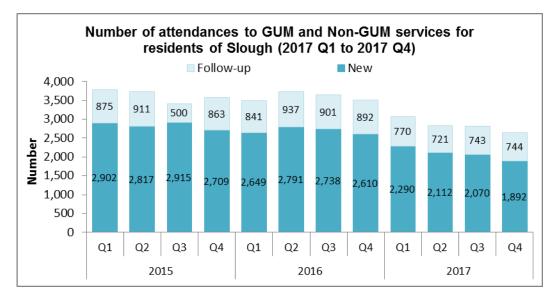
**40.6%** of all **under 18 conceptions ended in abortion** higher than the England figure of 51.8%

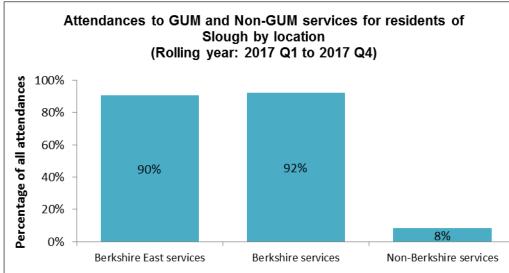
A total **abortion rate** of **14.0** per 1000 women lower than the England rate of 16.7/1000 **1063 total prescribed LARC** a rate

of **32.9** per 1000 15-45 year old women; lower than the England rate of 46.4/1000



#### **Clinic attendances - GUMCAD**





Slough residents made 11,355 attendances at sexual health services for STI-related care in 2017

89% of these were within Slough and 92% were within Berkshire

Slough residents also attended services in Reading, Westminster, Hillingdon, Wycombe and Hounslow\*

#### **Proposed service model - Slough**

- The Provider will provide an open access integrated sexual health service covering the core (level 1), non-specialist (level 2) and specialist (level 3) services in a location within Slough town centre. The service will have good public transport links and be easily accessible for local residents, residents of the other Berkshire East boroughs and others who may be present in the area
- The specialist service in Slough will operate for at least 29.5 hours per week, for at least six days per week including weekend and evening opening times
- The service will offer a mix of walk-in and booked appointments and will offer specific clinics for young-people and for men
- Using an appropriate proportion of clinic time to provide other targeted clinics for people at increased risk of sexual ill health such as for sexworkers, Lesbian, Gay, Bisexual, Trans, Questioning/Queer or people learning disabilities is encouraged.
- Slough residents will also have access to the open access non-specialist (level 2) services in Bracknell Forest and RBWM.