



## INTEGRATION JOINT BOARD

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| <b>Date of Meeting</b>                  | 10 October 2023   |
| <b>Report Title</b>                     | Fast Track Cities (FTCs) - Aberdeen   |
| <b>Report Number</b>                    | HSCP.23.053   |
| <b>Lead Officer</b>                     | Sandy Reid  |
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| <b>Consultation Checklist Completed</b> | Yes   |
| <b>Directions Required</b>              | No  |
| <b>Exempt</b>                           | No  |
| <b>Appendices</b>                       | None  |
| <b>Terms of Reference</b>               | 1. Any functions or remit which is, in terms of statute or legal requirement, bound to be undertaken by the IJB itself.   |

### 1.0 Purpose of the Report

This report brings forward an update on activity contributing to the Fast Track Cities (FTCs) Initiative.

### 2.0 Recommendations

It is recommended that the Integration Joint Board (IJB) acknowledge the delivery of the FTCs initiative in Aberdeen City and across Grampian and endorse the continuation of the work to help reduce the stigma of HIV.

### 3.0 Strategic Plan Context



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**3.1** The strategic plan for Aberdeen Health and Social Care Partnership (AHSCP) (2022-2025) includes reference to hosting Sexual Health Services (SHS).<sup>1</sup> The strategic plan acknowledges Healthcare Improvement Scotland (HIS) standards which sets out aspirations for delivering and sustaining SHS across Scotland.<sup>2</sup> Whilst work continues to update the National Framework for Sexual Health and Blood Borne Viruses (BBVs)<sup>3</sup>, and locally we benchmark ourselves against the HIS standards,<sup>2</sup> developing an action plan to deliver those standards; delivering the FTCs initiative for Aberdeen is a complimentary piece of preventative work (primary, secondary and tertiary) aligned to the strategic intent of AHSCP.

### 4.0 Summary of Key Information

#### ***Background to Fast Track Cities (FTCs)***

In February 2020, and again on 23 November 2022, the Paris Declaration (2014) [amended November 2019] was signed on behalf of the City of Aberdeen. The declaration pledges support to the FTCs initiative as part of the global focus on Human Immunodeficiency Virus (HIV), prevention, diagnosis and treatment. The signing of this declaration indicates the commitment of Aberdeen City to zero stigma, zero new HIV infections and zero AIDS-related deaths by 2030 as a partner in FTCs alongside other worldwide cities.

In brief, the Paris Declaration has three 90-90-90 (UNAIDS) targets which are:

1. To ensure that 90% of people living with HIV know their status,
2. To improve access to antiretroviral treatment for people living with HIV to 90%,
3. To increase the proportion of people living with HIV on antiretroviral therapy (ART) with an undetectable viral load to at least 90% and to reduce stigma and discrimination related to HIV to zero and by 2030 achieving:
  - Zero new transmissions
  - Zero related HIV-deaths
  - Zero HIV-related stigma

#### ***Progress against FTCs initiative in Aberdeen (and Grampian)***

In 2018 Scotland had already achieved the 90-90-90 (UNAIDS) targets, however, was impacted by the SARS-CoV-2 (COVID-19) Pandemic. Regrettably, data in respect of the first target (*to ensure that 90% of people living with HIV know their status*) can only be based on Public Health Scotland (PHS) data and which is yet to be confirmed. Data however, is available for the other two targets; in 2021 97%



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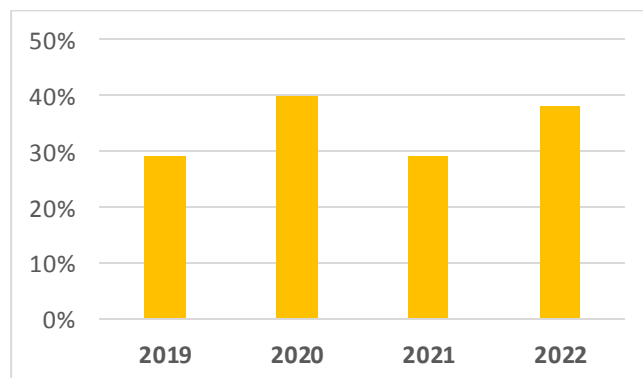
of people in Scotland living with HIV were receiving care with 94% having undetectable viral loads.

As previously reported while COVID-19 impacted people living with HIV in many ways, there was enthusiasm locally to maintain progress for FTCs. The Aberdeen (and Grampian) FTCs Group met throughout the pandemic and regular meeting continue; via Microsoft Teams and sharing thoughts, comments, plans and action via Basecamp.

Grampian SHS (hosted by AHSCP) and colleagues in the Infection Unit for NHS Grampian continue to deliver blended care (virtual and face to face) with a team of clinicians, pharmacist and clinical psychologist; Our Positive Voice Grampian (OPVG) continue been instrumental in supporting those who are newly diagnosed and/or living with HIV

Grampian (Aberdeen) continues to maintain the last two 90-90 targets with 99% on treatment and 98% undetectable in a cohort of N=491. Given the challenges from 2020 and beyond this is considered a significant achievement. Nevertheless, there continues to be a high proportion of late diagnoses (CD4 count <350 at diagnosis) and missed opportunities (where a patient presented to services with symptoms of HIV but were not tested, or who were eligible for HIV Pre-Exposure Prophylaxis (PrEP) but did not access or were not offered) [Figures 1 and 2 respectively].

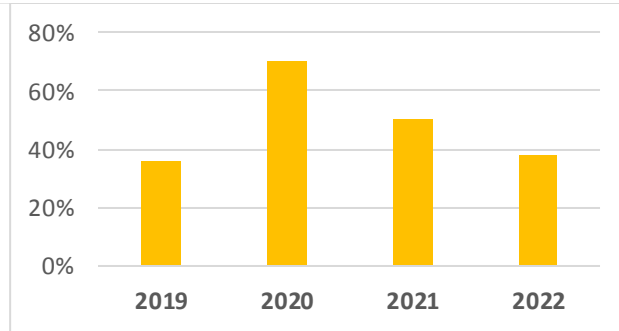
**Figure 1: Proportion of new diagnosis with CD4 (white blood cell) count of less than <350 cubic millimetres - indicating late diagnosis and weakened immune system.**



**Figure 2: Proportion of new diagnosis with missed opportunities for diagnosis or prevention.**

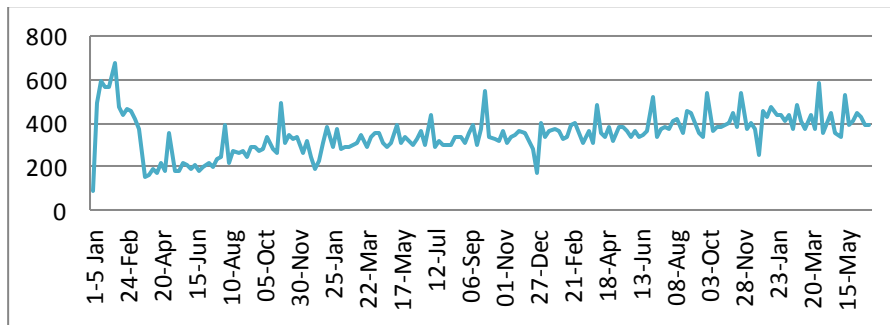


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That said, data regarding new diagnoses has to be interpreted with caution as testing rates, although recovering, continue to be at lower levels than before the pandemic (Figure 3). Testing therefore remains a priority action for the FTCs group and partners.

**Figure 3: NHS Grampian HIV test 2020- (May) 2023**



Whilst we await confirmation of the PHS data, action for improvement in 2023/24 includes:

- Increasing ‘No Talk Testing’ clinics and postal self-testing. This will create greater opportunities for people to enter into testing pathways without in line with personal preference;
- Outreach testing and increased Public Awareness at large public events such as Grampian Pride;
- Educational sessions for primary and secondary care colleagues in indicator conditions to prevent late diagnosis;
- Piloting ‘opt out’ testing of HIV (and other BBVs in partnership with colleagues in Aberdeen Royal Infirmary Emergency Department,
- Exploring the potential to pilot of HIV (and other BBVs) testing at community hubs i.e. Community Treatment and Care (CTAC).



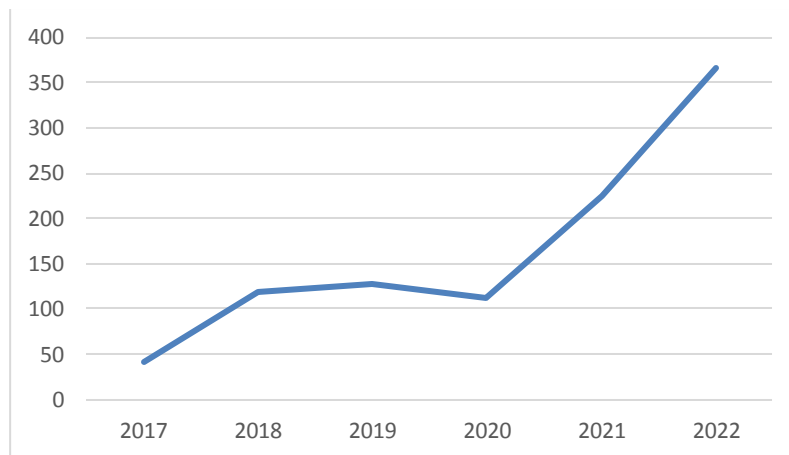
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The importance of recognising and embedding prevention activity, particularly in the lead up to World AIDS Day (WAD) is an important calendar event. The IJB are asked to recognise that a significant amount of work was completed by the FTCs group to keep a profile and awareness of HIV in the public domain, via respective organisations (AHSCP and NHS) and other partner organisations including OPVG, Alcohol and Drugs Action (ADA) and the Alcohol and Drug Partnerships (ADPs). Several social media posts outlined the importance of awareness of:

- the clinical indicators of HIV;
- knowing your HIV status;
- how to access PrEP and Post-Exposure Prophylaxis (PeP),
- the anti-stigma message U=U – Undetectable=Untransmittable.

Prevention in action also continues with the free condom programme and HIV PrEP provision, the latter which has increased substantially, especially post COVID-19 (Figure 4).

**Figure 4: Pre Exposure Prophylaxis (PrEP) prescribing in Grampian 2017-2022.**



Grampian SHS and NHS Grampian Managed Care Network (MCN) colleagues have successfully been awarded Scottish Government funding to pilot HIV PrEP provision in primary care to commence 2023/24, in an attempt to increase access in General Practice.

The aspirations of FTCs compliments the aims of the Partnership's Strategic Plan<sup>1</sup> but will also contribute towards reaching the HIS Standards for SHS<sup>2</sup> at a local level which is a commitment included in the Partnership's Strategic Plan.<sup>1</sup>



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### ***National FTC progress***

In brief the IJB are asked to note that FTCs across Scotland is being co-ordinated by [Waverly Care](#) who have recently held a National Consortium Meeting with representatives from Aberdeen (Grampian), Dundee, Perth, Edinburgh and Glasgow. Each area is different stage with the ambition that all Cities in Scotland will sign the Paris Declaration and join FTCs.

### **5.0 Implications for IJB**

There are no direct legal implications arising from the recommendations set out in the report.

#### **5.1 Equalities, Fairer Scotland and Health Inequality**

It is anticipated that the continued implementation will have a neutral to positive impact on the protected characteristics as defined in the Equality Act (2010). Increased knowledge and awareness of HIV in the general population and within public and private organisations is hoped to create a more positive environment for those living with HIV.

#### **5.2 Fairer Duty Scotland**

It is anticipated that the continued implementation will have a neutral to positive impact on people affected by socio-economic disadvantage. Increased knowledge and awareness of HIV in the general population and within public and private organisations is hoped to create a more positive environment for those living with HIV.

#### **5.3 Financial**

There is no specific financial implications as a result of this report. Actions will be delivered within existing budgets held jointly across AHSCP (Grampian SHS) and NHS Grampian MCN for Sexual Health and BBVs in addition to the specific Scottish Government funding for HIV PrEP in Primary Care pilot.

#### **5.4 Workforce**

There is no specific workforce implications; support to deliver the actions will be from existing resources.



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### 5.5 Legal

At this time, there is no anticipated legal implications in relation to this report.

### 5.6 Unpaid Carers

N/A

### 5.7 Information Governance

There are no direct information governance implications arising from the recommendations.

### 5.8 Environmental Impacts

There are no direct environmental implications arising from the recommendations of this report.

### 5.9 Sustainability

It is anticipated that the continued implementation will have a positive impact on service delivery and sustainability. Increased knowledge and awareness of HIV in the general population and within public and private organisations is hoped to create a more positive environment for those living with HIV.

### 5.10 Other

None.

## 6.0 Management of Risk

### 6.1 Identified risks(s)

This report provides information on actions that if delivered, will lead to improvements in testing, diagnoses, treatment and care for those who may have HIV or who are living with HIV. The Sexual Health Service has been under sustained pressure during the pandemic, with resourcing and staffing an issue. This comes with an increasing HIV cohort and was confounded by the delivery of the Monkey Pox (Mpox) assessment and vaccination within the service in 2022/23. More recently, the SHS has undergone recruitment to key posts (Consultant/Nursing) with the service now being fully staffed. Therefore the risks in



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delivering these actions remain low in relation to the risks described in the risk appetite statement.

### [Risk Appetite Statement](#)

#### **6.2 Link to risks on strategic or operational risk register:**

The risk register can be viewed on request – staffing risk is recorded as *low* given recent recruitment.

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### References

1. Aberdeen City Health and Social Care Partnership (2022) *Strategic/Delivery Plan 2022-2025*. Available at: [achscp-strategic-plan-2022-2025-final.pdf](https://www.aberdeencityhscp.scot/achscp-strategic-plan-2022-2025-final.pdf) ([aberdeencityhscp.scot](https://www.aberdeencityhscp.scot)) Date Accessed: 19/09/2023.
2. Health Care Improvement Scotland (2022) *Sexual Health Standards*. Available at: [Sexual health standards \(healthcareimprovementscotland.org\)](https://www.healthcareimprovementscotland.org/sexual-health-standards) Date Accessed: 19/09/2023.
3. Scottish Government. *National Framework for Sexual Health and Blood Borne Viruses 2015-2020 update*. Available at: [Sexual Health and Blood Borne Virus Framework 2015-2020 Update - gov.scot \(www.gov.scot\)](https://www.gov.scot/sexual-health-and-blood-borne-virus-framework-2015-2020-update) Date accessed: 19/09/2023.