


Health and Wellbeing Board 13 th January 2015	 Tower Hamlets Health and Wellbeing Board
Report of the London Borough of Tower Hamlets	Classification: Unrestricted
Request for HWB to consider becoming a supporter of the Halve it Coalition	

Lead Officer	Somen Banerjee
Contact Officers	Chris Lovitt
Executive Key Decision?	No

Executive Summary

Tower Hamlets is a high incidence area for HIV, with approximately 1,300 people living with HIV and an estimated additional 400 people infected with HIV but undiagnosed. HIV continues to be a life threatening illness, especially if diagnosed late when the immune system has been weakened. If HIV is diagnosed and treated early then health outcomes for the individual are significantly improved with much reduced costs to health and social care.

Reducing late diagnosis of HIV is a national and local priority. Becoming a supporter of the Halve it Coalition provides an opportunity for the Health and Well Being Board to publicly affirm the partnerships' commitment to reduce the harms of HIV by providing easy access to HIV testing, HIV treatments and ensuring people are diagnosed early.

Recommendations:

The Health and Wellbeing Board is recommended to:

1. To note the good progress that has been made in reducing the late diagnosis in Tower Hamlets of HIV through effective partnership work across the NHS, council and voluntary sector.
2. To ask the Mayor, as chair of the Health Well Being Board, to contact the Halve it Coalition and request that the Tower Hamlets Health and Well Being Board is listed as a supporter of the coalition's aims.
3. Continue the work across the partnership to increase the availability and uptake of HIV testing to ensure the health benefits of early diagnosis are realised.

1. REASONS FOR THE DECISIONS

- 1.1 Tower Hamlets is one of 64 Local Authorities with a high incidence of HIV and as such there are national recommendations and requirements for us to widen access to HIV testing.
- 1.2 Reducing HIV late diagnosis is a Public Health Outcome Framework reflecting the importance of early diagnosis for both the individual and the public sector.
- 1.3 The Halve it Coalition comprises 21 HIV charities, patient groups, clinician groups and observer members including the Local Government Association, Department of Health, Public Health England, NICE and has the support of Leader of the Opposition, Prime Minister and Deputy Prime Minister. By requesting that the Tower Hamlets Health and Well Being Board is listed as a supporter of the Coalition's aims we are making a public commitment that we agree with their aims and that we will continue our work to reduce HIV infections and associated health harms.

2. ALTERNATIVE OPTIONS

- 2.1 To request each individual organisation who are members of the Health and Well Being Board to support the Halve it Coalition - however this is likely to take some considerable time and be duplicative.
- 2.2 Not to support the Halve it Coalition.

3. DETAILS OF REPORT

BACKGROUND

What is HIV?

- 3.1 Human Immunodeficiency Virus or HIV is a retrovirus that infects the body and gradually destroys the body immune cells (CD4 cells) resulting in weakened immunity, increased likelihood of infections and reduced protection against many diseases including cancer. AIDS (Acquired Deficiency Syndrome) is the final stage of HIV infection, when the body can no longer fight life-threatening infections. With early diagnosis and effective treatment, most people with HIV will not go on to develop AIDS.
- 3.2 There are usually very few symptoms following HIV infection and infected people may remain well and unaware that they have HIV for a number of years. A range of HIV tests are available from saliva swabs, pin prick tests to traditional blood test.

How is HIV transmitted?

- 3.3 HIV is transmitted mainly through body fluids. Unprotected sexual practices (anal and vaginal sex) remain the main routes of transmission for HIV. Other routes include sharing needles by injecting drug users and mother to child transmission before or during birth and through breast milk. Healthcare associated HIV infection (blood transfusion and medical instruments) is very rare in industrialised countries but still an important mode of transmission in developing countries.

How can HIV be prevented?

- 3.4 There is currently no cure for HIV and no vaccine to prevent it.
- 3.5 At an individual level transmission of HIV can be prevented by effective condom use, treatment of an infected mother to prevent maternal transmission, provision of needle exchange, post exposure prophylaxis (PEP) and also new emerging methods such as pre- exposure prophylaxis (PrEP).
- 3.6 At a population level rates of HIV transmission can be reduced by early diagnosis providing an opportunity for behaviour change and effective treatment which greatly reduces infectivity.

What treatments are available for HIV?

- 3.7 There are a range of effective treatments for HIV and these are available free from the NHS to all patients regardless of residency or immigration status. If detected early and treatment is consistently maintained HIV is widely considered to be a chronic disease.

What is late diagnosis?

- 3.8 Late diagnosis is when an individual is diagnosed with HIV after the virus has already significantly weakened their immune system. This is usually defined as having a CD4 count of less than 350/mm³.
- 3.9 A late diagnosis leads to significantly worse outcomes for the individual with much increased rates of morbidity, chronic illness, hospital admissions and social care costs. Late diagnosis means an individual is ten times more likely to die within a year of diagnosis.
- 3.10 People diagnosed very late (CD4 <200 cells/mm³) are likely to have a life expectancy at least ten years shorter than somebody who starts treatment with a CD4 count of 350mm³.
- 3.11 Public Health Outcomes Indicator 3.04 measures late diagnosis and is defined as “the number of adults (aged 15 years or more) newly diagnosed with HIV infection with CD4 counts available within 91 days and indicating a count of less than 350 cells per mm³ as a percentage of number of adults

(aged 15 years or more) newly diagnosed with HIV infection with CD4 counts available within 91 days.”

HIV in Tower Hamlets

- 3.12 A detailed Local Authority level report on HIV infections is provided to the Director of Public Health every year by Public Health England .To ensure confidentiality of people living with HIV is maintained not all of the data is placed in the public domain or is reported on an aggregate level.
- 3.13 In 2013 there were 1320 adult residents (aged 15 years and older) in Tower Hamlets who received HIV-related care: 1120 males and 200 females. Among these approximately 65% were white, 17% black and the remaining 18% of other ethnic origins. Approximately 70% probably acquired their infection through sex between men, 22% through sex between men and women, less than 2% through injecting drug use and the remaining routes being unknown.
- 3.14 Between 2011 and 2013, 30% (95% CI 25-35) of HIV diagnoses in Tower Hamlets were made at a late stage of infection (CD4 count <350 cells/mm³ within 3 months of diagnosis) compared to 45% (95% CI 44-46) in England. Just over a quarter of the new infections amongst men who had sex with men were diagnosed late in this period and between 40%- 50% of the heterosexuals diagnosed.
- 3.15 It is estimated that approximately 400 people may have HIV in Tower Hamlets but be untested and unaware that they have the virus. By making HIV testing more available especially in primary care and acute settings, targeting awareness of the benefits of knowing your HIV status to people in high need groups we will continue to decrease late diagnosis and undiagnosed.

What is the Halve it Coalition?

- 3.16 The Halve it Coalition comprises 21 HIV charities, patient groups and clinician groups and they seek the support of statutory and voluntary partners to continue to prioritise HIV as an important public health issue through action to implement the following stated aims:-
- Fully implement National Institute for Health and Care Excellence (NICE) public health guidance on HIV testing.
 - Support the delivery of the Public Health Outcomes Framework (PHOF) by ensuring that local health organisations are equipped to realise the benefits of early detection of HIV.
 - Offer incentives to test for HIV in a variety of healthcare settings, for example through the Quality and Outcomes Framework (QOF) and Commissioning for Quality and Innovation (CQUIN) frameworks.
 - Ensure that people diagnosed with HIV have access to any retroviral therapies (ARTs) to prevent onward transmission in line with the joint

recommendations of the Expert Advisory Group on AIDS (EAGA) and the British HIV Association (BHIVA).

- Ensure quality-assured (ie CE marked) self-testing kits for HIV when available, are integrated into local HIV testing strategies along with home sampling kits
- 3.17 The Halve it Coalition has been successful in achieving national support including through observer members such as the Local Government Association, Department of Health, Public Health England, NICE and has the support of Leader of the Opposition, Prime Minister and Deputy Prime Minister.
- 3.18 The Halve it Coalition has already achieved many of their stated aims at a national level and are now seeking local organisations to sign up as supporters. Tower Hamlets Health and Well Being would be the first HWB to sign up and join Lewisham Council who signed up as a supporter on the 1st Dec 2014 as early local adopters.

What is Tower Hamlets doing to promote testing, prevention and treatment of HIV?

- 3.19 The NHS and council in Tower Hamlets have prioritised the implementation of the NICE guidance on HIV testing and greatly increased the availability and uptake of HIV testing.
- 3.20 Since 2012 the number of HIV tests undertaken in Primary Care has increased by over 50%. In 2014/15 we aim to undertake 5,700 tests.
- 3.21 Barts Health Care Trust have implemented HIV testing as part of routine diagnostics at the Royal London Accident and Emergency and promoted the uptake of testing through a “Go Viral” blood borne virus testing campaign to test for HIV, Hepatitis B & C run throughout November.
- 3.22 HIV treatment in Tower Hamlets is provided by the Grahame Hayton Unit at the Royal London Hospital- HIV treatments are provided in accordance with the clinical guidance from the British HIV Association. Since 2012 retrovirals to treat HIV have been provided free by the NHS regardless of residency or immigration status.
- 3.23 For the last two years the council, NHS and voluntary sector have taken part in HIV testing week during the last week of November promoting the uptake of HIV testing across Tower Hamlets.
- 3.24 Positive East, the award winning Tower Hamlets based east London HIV charity, provide support for people living with HIV and testing in many community settings.
- 3.25 Tower Hamlets is a partner in a London wide approach to HIV prevention targeting gay men and people from African Communities. HIV testing by post

proposals are being developed as part of this programme and likely to be adopted in 2015.

- 3.26 Social care for people living with HIV has been integrated into mainstream contracts and is commissioned by the council.
- 3.27 As part of the Public Health grant the council recomissioned sexual health promotion and HIV prevention in 2013/14 and continues to prioritise this investment as part of the £7.9m sexual health programme to promote sexual health and treat STIs.

4. COMMENTS OF THE CHIEF FINANCE OFFICER

- 4.1. There are no direct financial implications as a result of the recommendations in this report.

5. LEGAL COMMENTS

- 5.1. The three recommendations that the HWB are asked to agree in respect of reducing late diagnosis of HIV are consistent with the general policy, reflected in the Health and Social Care Act 2012, of giving HWBs responsibility for joint health and wellbeing strategies. As the HWB has statutory status, due regard should be given to its decision making authority within its terms of reference.
- 5.2. These recommendations are within the terms of reference of the HWB agreed by the Mayor in Cabinet on 4 December 2013, in particular:
- To encourage integrated working between persons who arrange for the provision of any health or social services in Tower Hamlets for the advancement of the health and wellbeing of the people in Tower Hamlets.
 - To communicate and engage with local people on how they could achieve the best possible quality of life and be supported to exercise choice and control over their personal health and wellbeing.
- 5.3. When considering its approach to planning how to meet the needs of residents in respect of reducing late diagnosis of HIV, the Council must have due regard to the need to eliminate unlawful conduct under the Equality Act 2010, the need to advance equality of opportunity and the need to foster good relations between persons who share a protected characteristic and those who do not.

6. ONE TOWER HAMLETS CONSIDERATIONS

- 6.1. Becoming a supporter of the Halve it Coalition is in keeping with the One Tower Hamlets aims as it seeks to reduce health inequalities and improve health, especially amongst often marginalised groups who suffer discrimination and poorer health outcomes.

7. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT

- 7.1 Supporting the Halve It Coalition will have a small positive impact on the environment by reducing the need for the production and disposal of pharmaceutical chemicals. The pharmaceutical industry is a resource intensive industry.

8. RISK MANAGEMENT IMPLICATIONS

- 8.1. Becoming a supporter of The Halve it Coalition is unlikely to expose the council or HWB to risk. In the event that the Halve it Coalition pursues a course of action that may present any risk to the council or partners then support for their aims can be withdrawn or restricted.

9. CRIME AND DISORDER REDUCTION IMPLICATIONS

- 9.1 There are no implications on crime or disorder of this proposal.

10. EFFICIENCY STATEMENT

- 10.1 There is no proposed expenditure associated with this proposal; however the Halve it Coalition aims will reduce health and social care costs through fewer late diagnosis and also reduced HIV transmission.
-