

Joint Strategic Needs Assessment



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Do you want to know more about the sexual health of residents in Richmond borough?

Read on for more information on the sexual health needs of the residents of Richmond and the local services that are available.

Welcome to the twelfth issue of the JSNA Newsletter - a rolling publication produced by Public Health that describes the health, social care and wellbeing of local residents. In this issue we will give an overview of the sexual health of people who live in Richmond.

Good sexual health is important to individuals as well as to society as a whole. Unintended pregnancies and sexually transmitted infections (STIs) can negatively affect the health and wellbeing of individuals. However, they can also present a wider risk to other people – for example, someone may have an STI without experiencing any symptoms and unwittingly pass it on to a partner, or to a baby during pregnancy.

Poor sexual health can also result in substantial costs to society through healthcare costs as well as costs relating to poor education, employment and social outcomes in the long-term. There is clear evidence that sexual health interventions and services are cost-effective and an 'invest to save' approach is needed to achieve long-term savings.

Prevention is a key issue within sexual health. This includes the provision of age-appropriate information and support to help people make informed and responsible decisions as well as protection of vulnerable people, such as children and young adults.

A detailed Joint Strategic Needs Assessment (JSNA) was published in summer 2014. This has been used to inform the development of a sexual health commissioning strategy and will support in the re-commissioning of sexual health services.

If you would like to contribute to future editions of this JSNA newsletter please get in touch with us at jsna@richmond.gov.uk. We will gladly receive and consider your feedback, data, information and intelligence for future newsletter publications. The next topic will have a focus on mental health and wellbeing.

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National and Local Strategies

Department of Health published two key documents in 2013 –

- A Framework for Sexual Health Improvement in England.
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/142592/9287-2900714-TSO-SexualHealthPolicyNW_ACCESSIBLE.pdf
- Commissioning Sexual Health services and interventions: Best practice guidance for local authorities.
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/144184/Sexual_Health_best_practice_guidance_for_local_authorities_with_IRB.pdf

Within the Framework document, the Government outlined its ambition to improve the sexual health and wellbeing of the whole population. In order to support this ambition, the following must be achieved:

- Reduce inequalities and improve sexual health outcomes
- Build an honest and open culture where everyone is able to make informed and responsible choices about relationships and sex
- Recognise that sexual ill health can affect all parts of society

The following documents provide the framework for local commitments:

- ***Sexual Health Needs Assessment***
<http://www.datarich.info/resource/view?resourceId=167>
- ***Joint Sexual Health Commissioning Strategy 2014-18***

The detailed Joint Strategic Needs Assessment (JSNA) was developed using national evidence and guidance as well as local information on outcomes, service use and needs. The JSNA was used in the development of a Sexual Health Commissioning Strategy (in draft).

The Sexual Health Commissioning Strategy 2014-18 is a joint strategy between London Borough of Richmond upon Thames (LBRuT) and NHS Richmond Clinical Commissioning Group (CCG) with the purpose to identify commissioning actions that can be taken to support improvements in sexual health within Richmond borough. It is intended that this strategy will support achievement of the following high-level outcomes:

- Reduce the rate of unintended pregnancies, particularly among young people
- Reduce the rate of STIs and HIV
- Reduce inequalities in sexual health

There are three commissioning priorities within this strategy to support achievement of the outcomes:

- Increase the focus on prevention and sexual health promotion
 - Strengthen community-based sexual health services
 - Commission high-quality services
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Snapshots

Sexual health services

- The sexual health services currently provided for Richmond residents include specialist services in hospitals, contraception services provided in community and prevention and support services provided mainly by voluntary sector organisations.
- More than 10,000 residents attend hospital-based, specialist sexual health services per year and two-thirds visit West Middlesex and Kingston Hospitals.
- The community based contraception and sexual health services are located at Teddington, Whitton and Twickenham, with more than 3,000 attendances per year.
- GP surgeries and community pharmacies provide a range of contraception.
- Chlamydia screening for young people (15-24 year-olds) is provided by a number of health services, online and through a range of outreach settings managed by Terrence Higgins Trust.
- Abortion services are provided by British Pregnancy Advisory Service (BPAS) and hospitals.

Human Immunodeficiency Virus (HIV)

- There are 304 Richmond residents diagnosed with HIV who access care services.
- 22 people were newly diagnosed in 2012.
- Richmond has a prevalence of 2.4 HIV diagnoses per 1000 adults, compared to 1.5 in the UK and is officially classed as 'high prevalence' area.
- HIV prevalence has increased by 42% over the last 4 years and by over 80% in the last decade.
- During 2010-12, 41% of new cases in Richmond were diagnosed after the point at which they should have started treatment (late diagnosis), compared to 45% in London and 48% in England.

Conceptions and abortions

- Around 50 teenagers conceive per year. Richmond has one of the lowest rates of teenage conceptions nationally - 19.9 per 1000 women (aged 15-17) in 2012, compared to 25.9 in London and 27.7 in England.
- During 2012, 571 women had an abortion and the rate of abortion per 1,000 women (15.7) is significantly lower than in London (22.4) but similar to England (16.6).
- Around one-third of abortions (34%) took place among women who have had an abortion previously.

Contraception

- Contraception is highly cost-effective – for every £1 spent on contraception, £11 is saved in other healthcare costs.
- In Richmond, during 2012-13:
 - 10,000 free condoms were distributed to young people as part of the 'C-Card' scheme.
 - 377 Emergency Hormonal Contraception pills were provided to women from GPs.
 - 2,906 people received contraception from community sexual health services, including 629 long-acting reversible contraception (LARC) - contraceptive injections, implants and intrauterine devices. LARC have been found to be more effective than condoms and the pill and also cost-effective.
- In Richmond during 2013-2014:
 - 321 Emergency Hormonal Contraception pills were provided to women from community pharmacies.
 - 1,034 women received LARC from GPs.

Sexually Transmitted Infections (STI)

- Richmond is ranked 124 out of 326 local authorities in England for STI rate with a total of 1,297 acute STI diagnoses made in 2012.
- 8% of women and 11% of men presenting with an acute STI are re-infected within a year.
- Herpes diagnoses have increased by one-third since 2009 and Gonorrhoea by 66% in a year.
- Chlamydia diagnosis rate is low (1,308 per 100,000), compared to 1,979 per 100,000 in England. A high diagnosis rate reflects success at identifying infections that may not otherwise be diagnosed and treated. The National Chlamydia Screening Programme (NCSP) recommends that local areas achieve a diagnosis rate of at least 2,300 positive screens per 100,000 residents.

Inequalities

- Age
 - In Richmond, over 40% of acute STI diagnoses are among those aged 15-24 (similar to London).
 - Males aged 35-54 account for over half of all HIV diagnoses, while those aged 55 and over account for 20% – an ageing cohort.
- Sexual orientation
 - Sex between men (63%) is the most common probable route of HIV infection.
 - 15% of all STI diagnoses are among men who have sex with men (MSM).
- Ethnicity
 - People from black ethnic groups account for 20% of HIV diagnoses but less than 1% of the total population.
 - STI rate among people from black ethnic groups is more than double the overall rate.

What next?

Throughout the year short topic-based reports are published on the Local Authority's web-site, enabling key messages to be shared with local partners.

Recently published health needs assessments:

- ***Carers***
- ***Equalities - Health needs assessments for the nine protected characteristics of the Equality Act 2010 (age, disability, gender, marriage, pregnancy and maternity, race, religion, sex/gender and sexual orientation)***
- ***Obesity in Children***
- ***Sexual Health***

All health needs assessments and quarterly newsletters are available via:

www.richmond.gov.uk/jsna.

Topics that are planned for future JSNA reports and newsletters include cardiology, elderly-frail, heart failure, mental health and wellbeing, obesity in adults, pharmaceutical services, substance misuse, suicide and self-harm and urgent care for children aged 0-5.

Look out for our newsletters and have a look at some of the resources we have highlighted below.

Further resources

- ***Public Health England (2014) Sexual and Reproductive Health Profiles, 2014.***
<http://fingertips.phe.org.uk/profile/sexualhealth/data>
- ***Sexually transmitted infections and chlamydia screening in England, 2013***
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/345181/Volume_8_number_24_hpr2414_AA_stis.pdf
- ***Table guide: STI data tables for England, 2013***
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/327529/2013_Table_Guide.pdf
- ***Public Health Outcomes Framework***
www.phoutcomes.info

Contact us

If you have any topics or issues you think the JSNA team could analyse, or if you would like to get involved in any of the work currently underway, please email us at:

jsna@richmond.gov.uk