

Welcome

Sexual Health Engagement
Evening 17.09.19

Agenda

1. **Welcome** – April Brooks
2. **Commissioning** sexual health services – Tina Henry
3. Web based **information** resources – Don Leslie
4. Current **hot topics** in GU Medicine – Dr. Elizabeth Claydon
5. Role of the **Health Advisor** – Amanda Smith
6. **Contraception** update – Dr. Nicky Morgan
7. **HIV** update – Rati Magura

Introducing Devon Sexual Health

- **Re-commissioning** quality integrated sexual health service
- **Devon Sexual Health** went live 1 July 2018
- Drivers for new service:
 - The need to **consolidate** and reconfigure existing services to meet need
 - The **reduction** in the public health grant
 - **National** guidance

Commissioning Responsibilities

Local Authority (Devon Sexual Health)	NHS England	CCGs
Contraception	HIV treatment and care	Termination of pregnancy services
STI testing and treatment	Prison sexual health services	Contraception for non-contraception purposes
Targeted outreach services	Sexual Assault Referral Services	Menopause
	Cervical Screening	

Objectives

- Open **access**
- **Focus** on self-care, prevention and 'at risk'
- Diagnosing, treating and preventing **STIs**
- Improving **contraception** choice
- Increasing **LARC** (Long Acting Reversible Contraception)
- **Reducing** unwanted pregnancies
- Increasing **HIV** testing
- Partnerships to **prevent** late diagnosis of HIV

How?

- Developing the **Digital** front-door
- Website www.devonsexualhealth.co.uk
- New online **e-referral** system
- Supporting our colleagues in **Primary Care**

Commissioning sexual health services

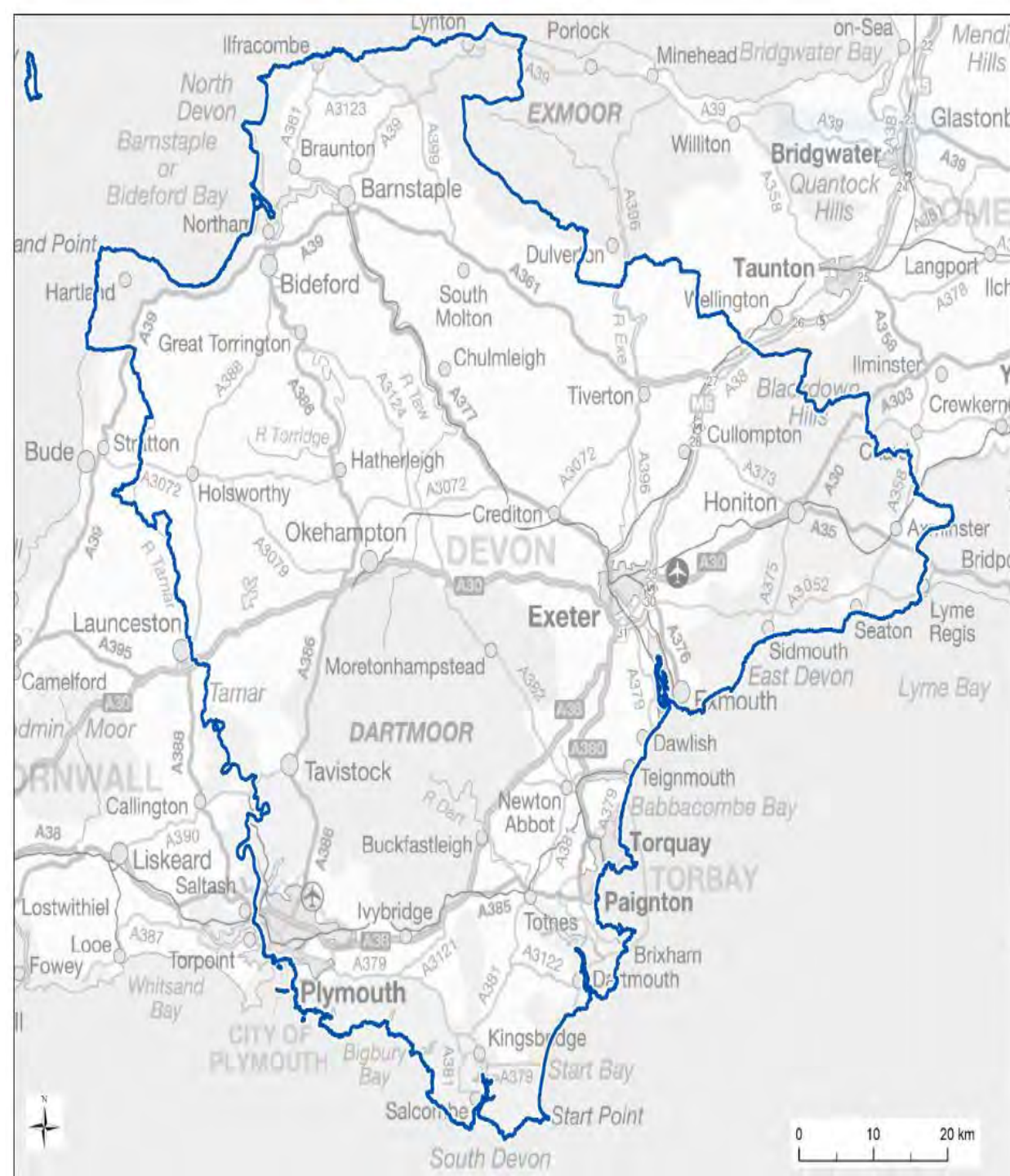
Tina Henry

Assistant Director Public
Health/Consultant Public Health
Devon County Council

Introduction and Key Issues

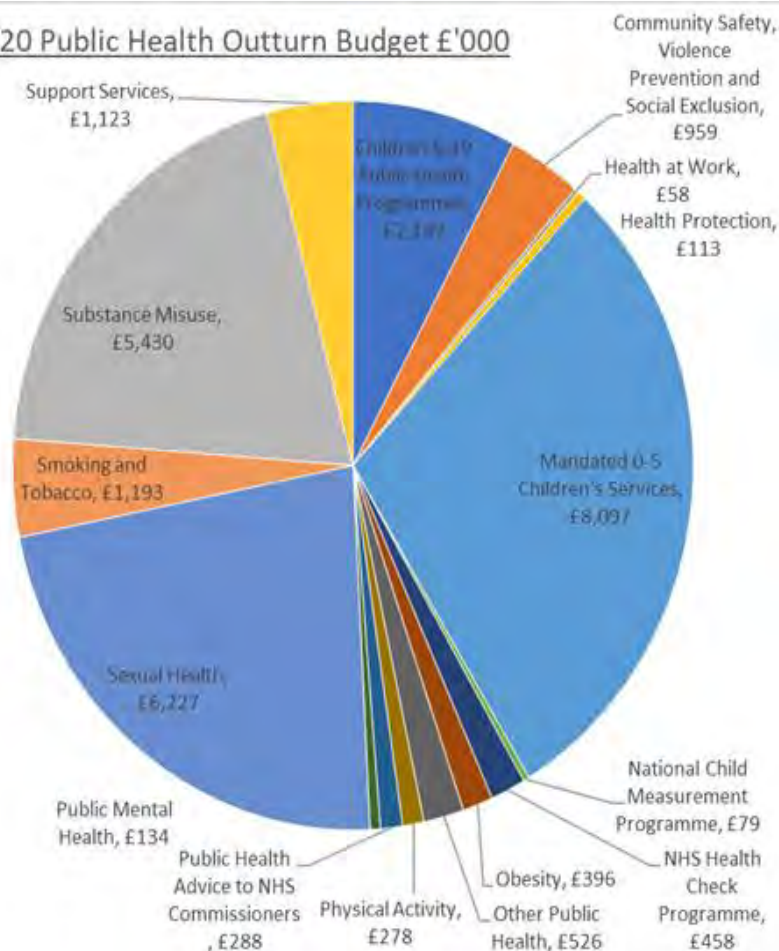
- Map of the **Devon County Council** Boundary
- Public Health **Responsibilities** and **Budget**
- **Mandatory** Provision of Sexual Health & Contraception Services: Commissioning Responsibilities
- Commissioners and Contract Providers **Working Together** to Deliver Quality Services

Local Authority Boundaries



Devon County Council Public Health Grant 2019/20

2019/20 Public Health Outturn Budget £'000



2019/20

Overall Public Health Devon Grant

£26,786,000

Public Health Devon Grant per head of population (ranked 141 out of 149 local authorities nationally)

£34

Average local authority Grant per head of population

£63

Highest local authority Grant per head of population

£241

Sexual Health Commissioning Responsibilities from March 2013



SH and Contraception Services

Commissioned by LA Public Health 1

- **Specialist** community sexual health and contraception services for all Devon residents (NDHT & UHP)
- **Online** Chlamydia screening & Chlamydia Testing Kits (13-24)
- **GP Practices**: IUD/IUS, SDI Fitting and removal & Chlamydia Screening 15-24 (*75 of 92 practices contracted to provide service*)
- **Community Pharmacies**: EHC & Chlamydia Screening 13-24 (*84 of 141 pharmacies contracted to provide service*)

Cont...

SH and Contraception Services

Commissioned by LA Public Health 2

- **C**Card Condom Distribution Scheme (13-24 years)
targeted to organisations/groups working directly with young people
- Community **HIV prevention** and a small amount of sexual health training for non-clinical workforce (voluntary sector)
- Small annual grant for targeted young peoples' sexual health **prevention** work (voluntary sector)

Working Together to Deliver Quality Sexual Health and Contraception Services in Devon

- ***Making it work: a guide to whole system commissioning for sexual health, reproductive health and HIV (PHE: 2014 revised March 2015)***
- Some **good examples** of local joint working with a range of providers and commissioner to improve the quality of service delivery and get the best value from contracts:
 - **Implementation** of the new Sexual Health and Contraception Service contract across the Devon and Torbay areas

Cont...

Working Together to Deliver Quality Sexual Health and Contraception Services in Devon

- Development of a **Community Pharmacy PGD** for Ulipristal (and Levonorgestrel) (service commenced October 2018)
- Audit of **IUD/SDI** GP/Nurse fitters in primary care 2019)
- Smarter use of local services **intelligence** to inform best practice
- **Work with** Exeter Student Health Centre, Exeter University and Exeter FE College regarding the student population
- **Primary Care Networks** bring new and exciting opportunities for commissioning going forward

Information resources

Don Leslie

How can we help you?



Welcome to the new sexual health website for Devon. [Click here for more information](#)

At a glance

What would you like to know more about?



CONTRACEPTION



HIV CARE



FREE TESTING KIT



STIS



YOUR NEAREST CLINIC



How can we help you?

You can select more than one option

I think I have been exposed to HIV	I have been sexually assaulted / raped
I have had unprotected sex in the last 72 hours	I have symptoms (e.g. pain when peeing, discharge, unexpected bleeding, cuts/sores, lumps)
I have been told by a partner / clinic that I might have an STI	I am pregnant, or I think I might be pregnant, and need advice
I would like to be tested for STIs	I would like some condoms
I would like to start contraception	I would like more of my contraception
I am having problems with, or need advice about, contraception	I need emergency contraception (the "morning after pill")

Next



1. I would like to be tested for STIs

What is your gender?

Choose an option...

Who do you have sex with?

Choose an option...

What is your age?

Choose an option...

Your answers are not saved and are used only to direct you to information

Back

Next

Skip



Why are we asking these questions?

Welcome to the new sexual health website for Devon. [Click here for more information](#)



Your results

Based on the information you have provided we would suggest you take a look at the following:

[Read more](#)

Where to get emergency contraception

Emergency contraception is best discussed quickly. You can get it from a pharmacy, some GP surgeries or your nearest Devon Sexual Health clinic.

Why am I seeing this?

[Read more](#)

Emergency contraception

Emergency contraception is designed to prevent pregnancy when your normal methods of birth control have failed.

Why am I seeing this?

Think emergency contraception if you are not on a reliable method

[Read more](#)

Order a chlamydia test online

You can order a chlamydia test online. This will be sent to you in the post so you can test at home.

Why am I seeing this?

You can order a home test for chlamydia here

[Read more](#)

Sit and wait service

Many of our clinics offer a sit and wait service for you to attend without an appointment to discuss your sexual health.

Why am I seeing this?

For urgent needs please consider our walk-in service

[Read more](#)

What happens at a clinic

If you are worried about coming to see us then let us put your mind at rest by explaining what will happen and what to expect.

Why am I seeing this?

Click to find out what a visit to one of our clinics is like

[Read more](#)

Book an appointment

We offer booked appointments throughout our Devon-wide service to discuss your sexual health needs.

Why am I seeing this?

Thinking mainly about symptom-free testing? Please book an appointment

[Read more](#)[Read more](#)[Read more](#)



Contraception

STIs

Our clinics

Sex, health & relationships

Professionals

Contact

Contraception



Easy read

Contraception helps to prevent unwanted pregnancy and there's no shortage of choice with **12 methods** available.



Contraceptive pill



Emergency contraception



Copper coil IUD



Hormonal IUS



Condoms



Contraceptive implant



Natural family planning



Injections



Contraception - Easy read



Vaginal ring



Sterilisation



Contraceptive patch



Diaphragms



Copper coil IUD

99% effective

Lasts 5-10 years

No hormones

Doesn't prevent STIs





HOW EFFECTIVE IS IT?



WHO CAN USE IT?



SIDE EFFECTS



WHERE CAN I GET IT?



WHAT HAPPENS



PROS & CONS



FAQS



Copper coil IUD

A copper coil is an intrauterine device (IUD). It is a small plastic and copper contraceptive device that is fitted into your uterus (womb). It has two threads that hang down to enable you to check that it is in place and to allow your doctor to remove it at a later date. The IUD is also known as the coil. It stops you from getting pregnant by slowly releasing copper, which prevents sperm from surviving in your cervix, uterus or fallopian tubes. It may also stop fertilised eggs from implanting in the womb.



How effective is the copper coil IUD?

A copper coil IUD is 99% effective at preventing pregnancy and can last for 5 or 10 years depending on the type. It can also be fitted as a form of emergency contraception up to 5 days after unprotected sex. It starts working as soon as it is fitted and your fertility will return to normal as soon as it is removed. Occasionally, the IUD can be pushed out by your uterus, or it can move which would stop it from working. This doesn't happen very often and staff at your Devon Sexual Health clinic will show you how to check so you know it's in the right place.



Who can use a copper coil IUD?

Most women can use the copper coil IUD, including those who are HIV positive. It is especially popular with young women. When you come in and see us, we will ask about your medical history and whether you have had any illnesses or complications just to check if the IUD is suitable for you. If you are already pregnant, have problems with your uterus or cervix or have an untreated STI then we may advise you about other methods of contraception. Everyone's different so please come in and have a chat.

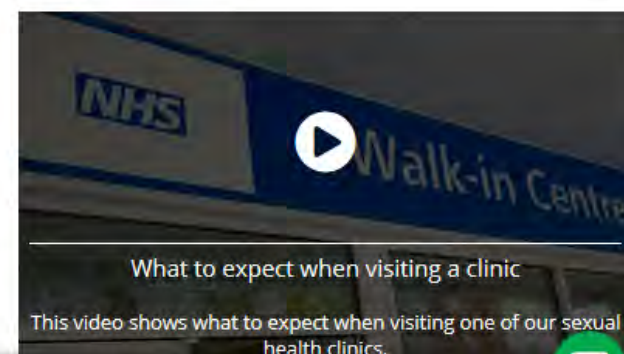


Are there any side effects?

Some women may experience some spotting or cramps for a number of days following insertion of an IUD. Heavier, longer or more painful periods when an IUD is fitted, especially in the first few months can also be quite common. There is also a small chance of infection especially during the first 20 days, so if you notice any unusual vaginal discharge or pain then please come back and see us as soon as possible.

The copper coil IUD is an extremely effective form of contraception and it's very unlikely that you will get pregnant. If you do, there is a slightly increased chance that it will result in an ectopic pregnancy [\[link\]](#).

It's also important to remember that an IUD cannot prevent you from getting a sexually transmitted infection. If you have a new partner or are unsure of your partner's sexual history, you should still come in for a check-up.





Frequently asked questions about Copper Coil IUD

Will a copper coil IUD make me gain weight?



No. There is no evidence to support weight gain in women using the copper coil.

Will an IUD protect me against STIs?



Are tampons or mooncups safe to use with a copper coil IUD?



How often should I check my IUD?



How soon after having a copper coil IUD fitted can I have sex?



When can I have an IUD fitted?



Can an IUD move around inside your body?



What age can I have an IUD fitted?



Will my partner feel the strings when we have sex?



Will a copper coil IUD affect my fertility?



Will an IUD cause pelvic inflammatory disease?



Will an IUD fall out or get knocked out by accident?



Does the IUD cause an abortion?



STIs

 Easy read

Find out what you need to know and get advice about Sexually Transmitted Infections:

[Scabies](#)[Lymphogranuloma Venereum \(LGV\)](#)[Pubic lice](#)[Hepatitis C](#)[Bacterial Vaginosis](#)[Syphilis](#)[HIV](#)[Genital warts](#)[Chlamydia](#)[Molluscum Contagiosum \(MC\)](#)[Pelvic Inflammatory Disease \(PID\)](#)[Non-specific Urethritis \(NSU\)](#)[Herpes](#)[Hepatitis B](#)[Epididymo-orchitis](#)[Gonorrhoea](#)[Trichomonas Vaginalis \(TV\)](#)[Thrush](#)[Mycoplasma Genitalium](#)[Sexually Transmitted Infections: Easy read](#)

STIs are sexually transmitted infections that people get through sexual activity. They are incredibly common and just like any other infection, such as a cold, it is nothing to be embarrassed about. It's really important that you seek help and get treatment because, unlike a cold, they do not usually clear up on their own. Click on one of the boxes above to find out more.





WHAT IS CHLAMYDIA?



SYMPTOMS



TREATMENT



I THINK I HAVE CHLAMYDIA



AVOIDANCE



FAQS



What is Chlamydia?

Chlamydia is a bacterial infection that is spread through contact with infected genital fluids (semen or vaginal fluid). You can pick it up from all types of [sexual contact](#), vaginal, anal, oral sex or sharing sex toys. Chlamydia is the most common bacterial STI in the UK especially amongst sexually active teenagers and young adults. The bacteria are called *chlamydia trachomatis*.



Symptoms

Most people who have chlamydia don't notice any symptoms. Around two thirds of women and half of all men with chlamydia won't have any obvious signs.

If you do get symptoms, these usually appear between 1 and 3 weeks after having unprotected sex with an infected person. Symptoms are slightly different for men and women.

Chlamydia symptoms in men include:

- pain when peeing
- white discharge from the tip of the penis
- burning or itching in the urethra (the tube that carries urine out of the body)
- pain in the testicles
- discomfort or discharge from your bum – if you have had anal sex

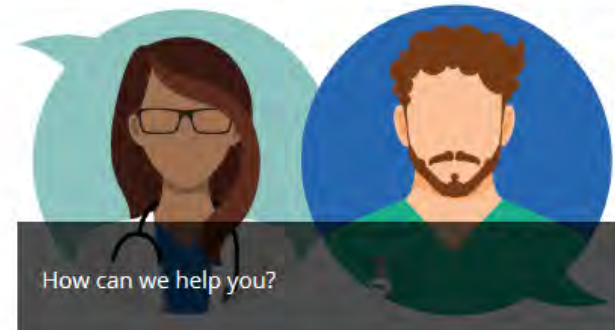
Chlamydia symptoms in women include:

- pain when peeing
- unusual vaginal discharge
- pain in the tummy or pelvis
- pain during sex
- bleeding after sex
- bleeding between periods
- discomfort or discharge from your bum – if you have had anal sex

Sometimes the symptoms can be so mild that you don't notice them and disappear after a few days. Even if the symptoms disappear you could still have the infection and be able to pass it on.



Treatment



Devon Sexual Health

Contraception, Sexual Health & HIV service

Search ...



Contraception

STIs

Our clinics

Sex, health & relationships

Professionals

Pharmacy training resources

Advice on patient disclosure of sexual
assaultClinical guidelines and professional
information

Training

Safeguarding

Referral form for Devon sexual health



The Crime survey of England and Wales carried out by the Office for National Statistics estimated that 20% of women and 4% of men have experienced some type of sexual assault since the age of 16. This is equivalent to an estimated 3.4 million female victims and 631,000 male victims. This means it is highly likely that at some point anyone working in the healthcare profession will meet someone who has been sexually assaulted.

It is important that you are able to advise people on their options and what they should do if they make a disclosure to you.

Medical practitioners should contact Devon & Cornwall SARC (Sexual Assault Referral Centre) on [0300 3034626](tel:03003034626) or by filling in an [online referral form](#).

Services offered by a SARC

It will be helpful if you can advise someone making a disclosure of sexual assault about where to go and what they can expect when they get there.

A SARC is a safe and private location that offers medical, practical and emotional support for people that have suffered [sexual assault](#) or rape. They are staffed by specially trained NHS doctors, nurses and support workers.

The services offered by a SARC include;

- Immediate medical support
- Injury documentation
- Forensic examination
- Advice regarding STIs and referral for STI testing
- Emergency contraception
- Psychological support
- Practical support and advice about options
- Access to an independent sexual violence advisor ([ISVA](#)) to help guide and support them through the process.

Timescales for referral

<https://www.devonsexualhealth.nhs.uk/professionals/> **Make an appointment**

PEP

Find out more about PEP or PEPSE

**Devon & Cornwall SARC**
Sexual Assault Referral Centre **Exeter**

Find a service near me

Online referral

Referral form for Devon Sexual Health

Date of referral *

16/09/2019

Referrer's name *

Prefix

First

Last

Referrer's department and address

Referrer contact number

Referrer contact email *

Enter Email

Confirm Email

Patient Details

Patient name *

Prefix

First

Last

Date of birth *

Day Month Year

Age *

Patient contact number *

Patient contact address

Patient consents to contact via *

☐ Telephone

☐ Letter

Please tick all that apply

Referral Details

Referring for *

☐ Referral to Chlamydia Screening for Compliance and Partner Notification - Under 25s only

☐ Contraception provision

☐ Clinical advice

☐ Testing for STIs

☐ STI treatment

☐ Partner Notification

☐ HIV care

☐ Other

Please tick all that apply

Referring to *

Please select

Rationale for referral *

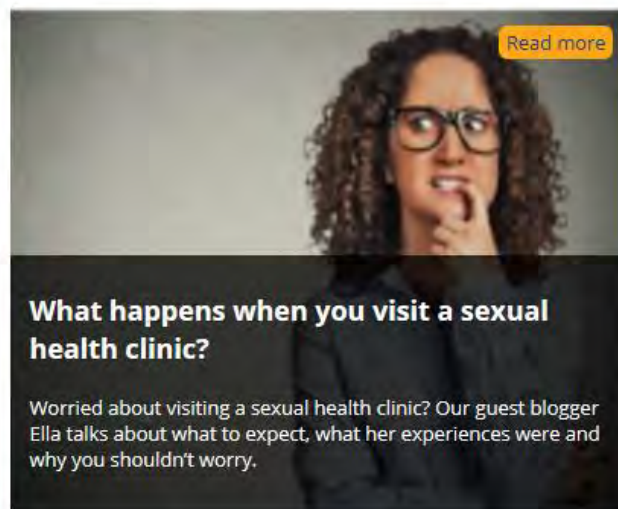
News & Stories



[Read more](#)

Your new sexual health website.

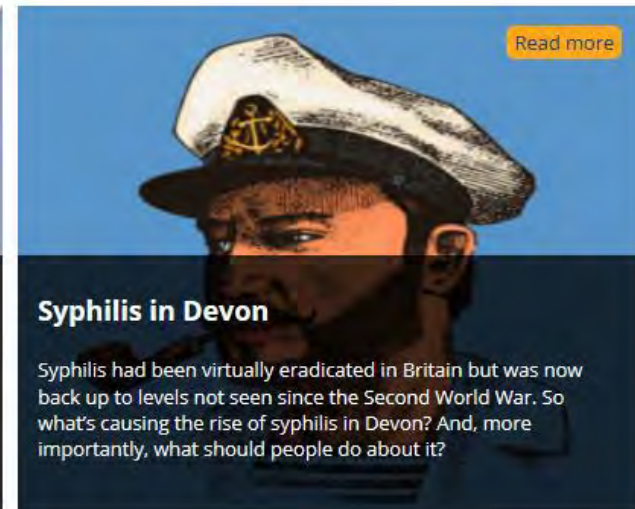
Our new website is based on feedback from people like you. People who use our services. People who enjoy a healthy sex-life. People who want to care for themselves and their partners. People, who want to find out more.



[Read more](#)

What happens when you visit a sexual health clinic?

Worried about visiting a sexual health clinic? Our guest blogger Ella talks about what to expect, what her experiences were and why you shouldn't worry.



[Read more](#)

Syphilis in Devon

Syphilis had been virtually eradicated in Britain but was now back up to levels not seen since the Second World War. So what's causing the rise of syphilis in Devon? And, more importantly, what should people do about it?

Welcome to **Devon Sexual Health** – providing sexual health services that support healthy relationships and sexual well-being.

Our sexual health and contraception services are [confidential](#) – even for those aged under 16 years old. No-one can access our patient records apart from staff working in our clinics.



Devon Sexual Health

5k monthly unique viewers

Devon, England
devonsexualhealth.co.uk

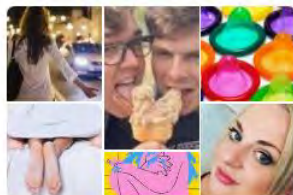
Providing sexual health services that support healthy relationships and sexual wellbeing.



Contraception
10 Pins



Female Health
14 Pins



Sexual Health
11 Pins



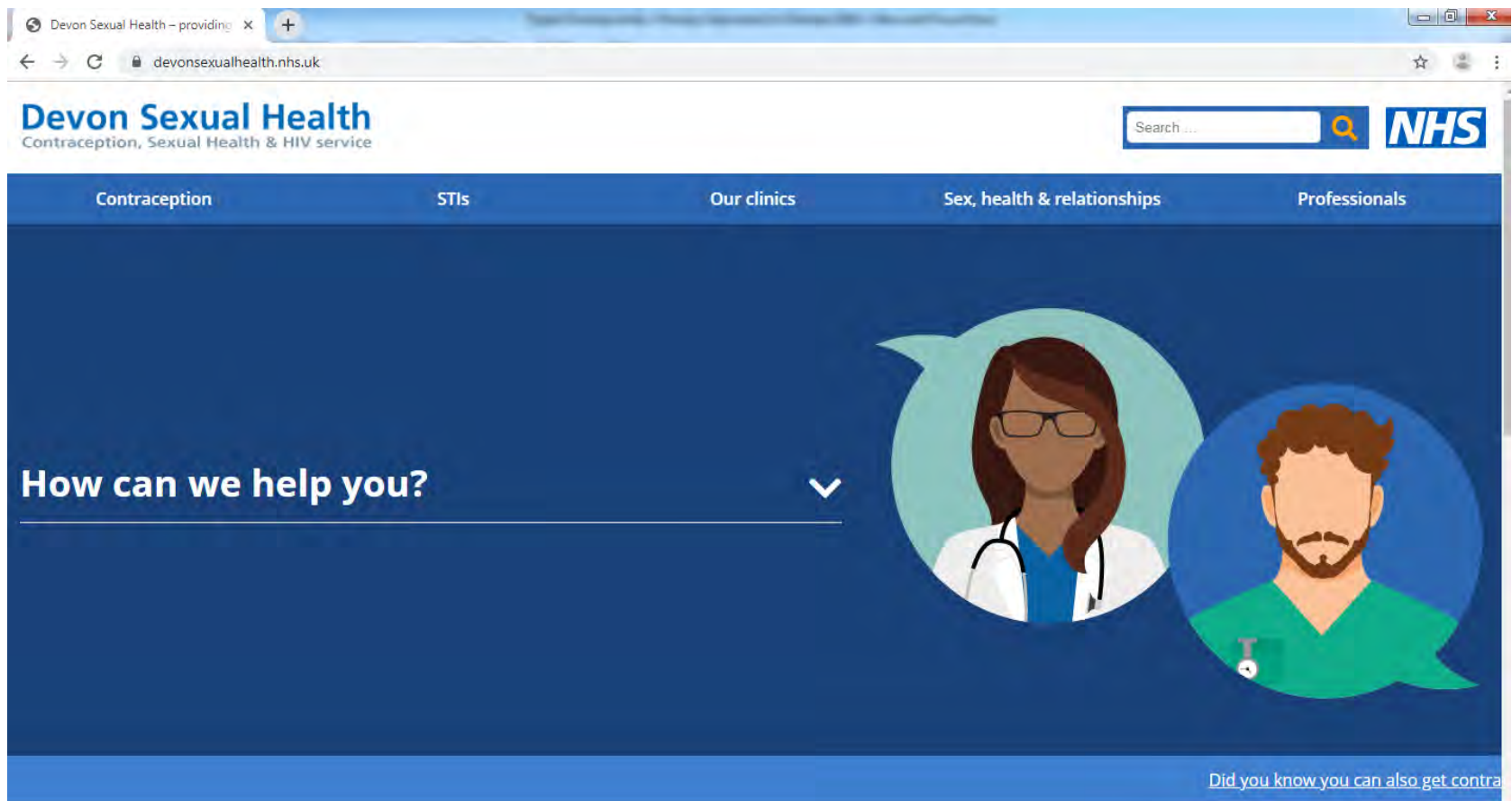
Sex Education
7 Pins



www.devonsexualhealth.co.uk

Future developments

- Live Webchat
- Online appointment booking
- SXT Electronic Partner Notification
- Targeted postal testing
- “Virtual Appointments”



devonsexualhealth.nhs.uk

STI-Hot Topics

Dr. Elizabeth Claydon

Chlamydia

- First line treatment is now **Doxycycline** 100mg bd for 7/7
- If contra-indicated: **Azithromycin** 1gm stat, then 500mg daily for 2 days
- **Avoid** single dose Azithromycin
- **Rectal Chlamydia** is quite common in females but appears not related to anal intercourse

Gonorrhoea

- **Increase** in incidence in North Devon
- Throat swabs for Gonorrhoea recommended for all patients with history of **sexual contact in SE Asia** regardless of sexual orientation
- Current treatment is **Ceftriaxone** 1g IM in 3.5ml Lidocaine, without adjuvant antibiotics
- **No** high level resistance in N.Devon (yet)

Mycoplasma genitalium

- Testing recommended in cases of:
 - Persistent/recurrent urethritis
 - Persistent/recurrent PID
 - Current partners of individuals +ve for M.genitalium
- Antibiotic sensitivity should be determined for +ve cases

Mycoplasma genitalium

- Treatment:
 - Doxycycline 100mg bd x 7/7, then Azithromycin 1g then 500mg daily for 2/7
 - Moxifloxacin 400mg daily x 10/7
 - Pristinamycin 1g qds x10/7
- TOC at 6 weeks

Men who have sex with Men (MSM)

- Hepatitis **A** vaccination
- Hepatitis **B** vaccination
- **HPV (Gardasil)** vaccination for <45yrs
- **PrEP** Impact Study

pH for BV

- pH > 4.5 reasonably sensitive but poor specificity
- pH > 4.5 alternative diagnoses:
 - TV
 - Peri/post menopausal
 - Aerobic vaginitis
 - Post-coital
 - Inflammatory candida or mixed infection

Sexual Health Advisers

Amanda Smith
Nurse Adviser

The Health Adviser Role

- Have a key role in the delivery of Public Health Interventions to **support** an individuals health & well-being
- **Preventing** & **reducing** health care needs now & in the future & reducing NHS costs
- We are part of a multi-disciplinary team **promoting** good sexual health

Meet the team



Joey Hamilton
Health Adviser



Amanda Smith
Nurse Health Adviser &
HIV Nurse

Meet the team



Heather Collins
Nurse Health Adviser




Cathy Pearce
Sexual Health Nurse

Meet the team



Kelly Stonehouse
Results Co-ordinator


What we do

- * Information
 - * Advice
 - * Support
 - * Signposting
- 
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Patient advice

- We help patients to **understand** & **manage** their conditions.
- We **treat** & **explain** treatments: From how to safely take Doxycycline for Chlamydia, to Aciclovir suppression therapy for HSV.

Health promotion & education

- We promote **safer sex** and condom use
 - **Advise** & **support** high-risk patients regarding their sexual practices
 - Contact **tracing** & partner **notification**
- 
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HIV advice & support

- HIV Testing (Including results advice & support)
- PEP
- PrEP
- PrEP Impact Trial

Vaccinations

- Hepatitis B
- Hepatitis A
- HPV (Gardasil)

Patient support

- Drug & Alcohol
 - Domestic Violence & Abuse
 - Sexual Assault / Rape
 - Child Safeguarding
 - Adult Safeguarding
 - LGBTQ+ Community
- 
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We're here to help!

If you have any questions or need support with your patients, please call & speak to one of us.

If we can help, we will!

What's new in contraception?

Dr Nicky Morgan
Clinical Lead for contraception

What's new in contraception?

- Tailored regime for **CHC**
- Guidelines on contraception and **weight**
- **Emergency** hormonal contraception
- New courses for **HCP**

Tailored regime for CHC

- Shortened HFI to 4 days
- Extended regime 21x3 then 7 or 4 day HFI
- Flexible regime Continuous use until bleeding 3-4 days then 4 day HFI (at least 21 active pills prior to break)
- Continuous regime No HFI

Why offer a tailored regime?

- Some **ovarian activity** by day 7 HFI
- **Fewer** days bleeding
- **Avoids SE** associated with HFI
- Safe
- Off label but FSRH/WHO **endorsed**
- **20mcg** pills best bleed pattern

Obesity and contraception

- No need to **increase** dose POP
- No need to **change** implant early
- LNG EHC may be **less** effective if BMI is **over** 26 (or 70kg)
- UPA EHC may be **less** effective if BMI **over** 30 (or 85kg)
- Double LNG off label **do not** double UPA.

Contraception and weight gain

- No evidence of weight gain on most methods
- Possible weight gain on DMPA
- Risk factors under-18 years and BMI>30
- or If gain weight over 5% in first 6/12

Weight loss treatments and contraception

- Oral medications- **beware** oral preparations
- Surgery- **avoid pregnancy** for 18/12 post-op
- **Decreased** absorption of oral preparations
- DMPA **beware** BMD effects
- IUD / IUS / Implant **best** options

Emergency contraception

- Give EHC **ASAP**
- Ulipristal best **mid-cycle**
- PCIUD **most effective** method
- Ulipristal and progestogens **interact**
- Pharmacy PGD for emergency contraception **free** for under 25s

SRH courses

- SRH essentials- aimed at practice nurses
- Essentials courses for midwives
- DFSRH new format Jan 2020
- LoC SDI/IUT
- Other qualifications e.g Implant insertion only for midwives and abortion care HCP

Working better together

- Referral form on website
- SRH champions in each practice to share best practice and new developments eg Nexplanon insertion site
- Any other suggestions?

HIV Update

Ratidzai Magura

Clinical Pharmacist HIV & Sexual Health

Objectives

- UK national guidelines for [HIV testing](#).
- [Pre-exposure](#) prophylaxis.
- Drug Interactions
- Undetectable = Untransmissable

Who should be offered an HIV test?



HIV testing - UK national guidelines

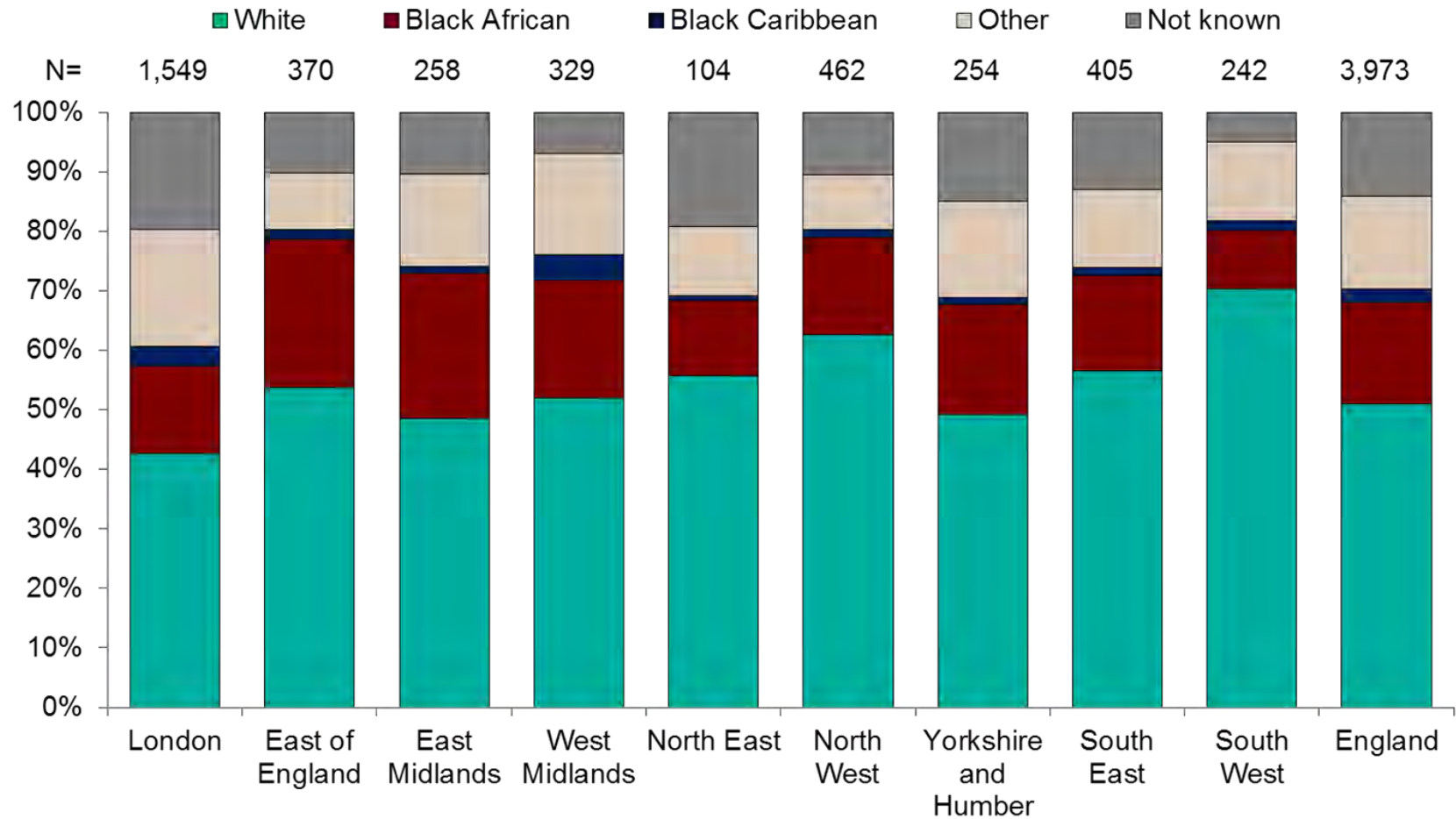
- Normalising testing
- Non-sexual health setting
- Testing those at risk
 - Risk groups
 - Clinical settings
 - Indicator illnesses
 - Opt-out testing > 2:1000 prevalence

Indicator Illnesses for HIV

Some examples

- **Respiratory** – tuberculosis
- **Dermatology** – ‘stubborn’ psoriasis
- **Gastroenterology** - chronic diarrhoea of unknown cause
- **Other** - any sexually transmitted infection

Proportion of people newly diagnosed with HIV by PHE centre of residence and ethnicity: England 2017



Impact of testing for HIV

- **Individual** benefit – access to treatment and care.
- **Population** benefit – impact on transmission.
- HIV **prevention** strategies depend on knowledge of status e.g PrEP

What is PrEP ?

- PrEP (HIV Pre-exposure Prophylaxis) is a medicine for **HIV prevention**.
- PrEP is different to PEP, in that you take it in **advance of sex**, rather than afterwards, as an emergency.

How to access PrEP



St Stephen's
CLINICAL RESEARCH

PrEP Impact Trial

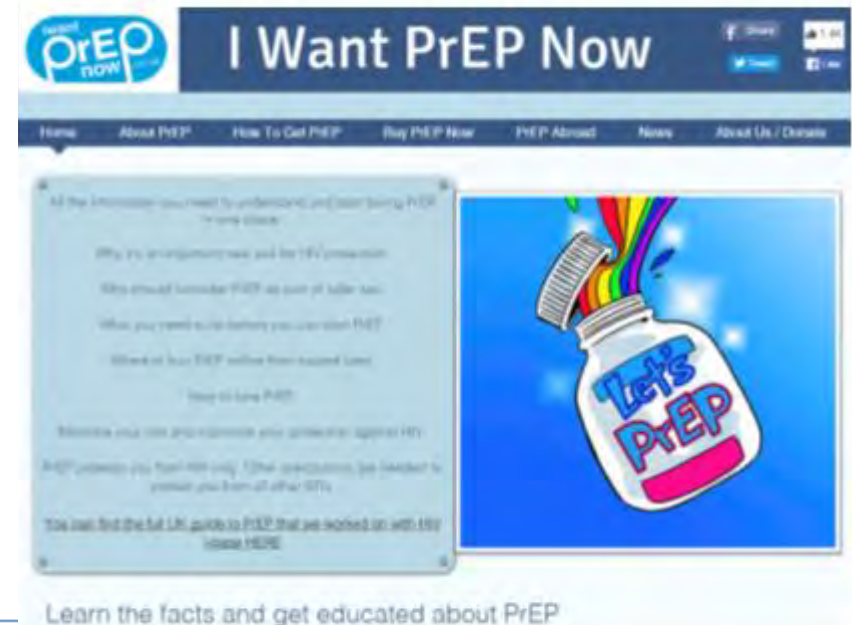
A Pragmatic Health Technology Assessment of PrEP and Implementation

Chief Investigator: Professor Brian Gazzard

Sponsor: St Stephen's Clinical Research

Trial Management: St Stephen's Clinical Research in Partnership with Public Health England

Funder: NHS England



Drug Interactions

- University of Liverpool

www.hiv-druginteractions.org

- Always remember the electronic medicines compendium for detailed product information:

www.medicines.org.uk/emc

HIV iChart app users - please update to the newest version to ensure up-to-date information

Interaction Checker

Access our free, comprehensive and user-friendly drug interaction charts

Educational Videos

A series of mini-lectures on topics including pharmacology, HIV and drug-drug interactions

Prescribing Resources

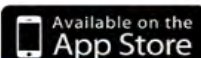
Interaction tables, treatment selectors, clinical prescribing resources, and pharmacokinetic fact sheets

Twitter

 [@hivinteractions](#)

Follow us on Twitter for interaction news and for the latest additions and changes to the website

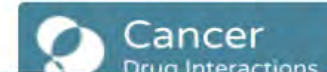
Mobile Apps



Hepatitis Website



Cancer Website



Antiretroviral treatment

Has changed the outlook of patients living with HIV:

- Treatment is **easier** to take.
- **Increased** life expectancy
- **No risk** of transmitting HIV
- **Prevents** transmission of HIV from mother to child during pregnancy/birth.

U=U

Undetectable equals Untransmissable



A person living with HIV is considered 'undetectable' (virally suppressed) when HIV treatment brings levels of HIV in the body to such low levels that tests cannot detect it.

As long as treatment is adhered to and viral load remains undetectable (and monitored), they cannot transmit HIV to others and their health is not affected by HIV.

Avert >

Any questions ?

**How can we help support
your clinical practice ?**