

PUBLICATION

Cabinet paper: HIV Action Plan for Wales

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Decision required

The Cabinet is asked to agree the HIV Action Plan, and for approval to publish the final plan in early March.

Summary

1. The Programme for Government (PfG) made commitments to "develop an HIV Action Plan for Wales" and "to tackle HIV related stigma".

- A draft HIV Action Plan for Wales has been developed by an HIV Action Plan Working Group and supported by three task-and-finish groups.
- Membership of these groups came from a broad range of organisations, including people living with HIV.
- The draft plan was launched on 14th June and was the subject of a 12-week consultation period.
- The plan was well received and has been amended to take account of the consultation responses.
- The Working Group will reconvene on 09 February to sign off the postconsultation amendments.
- A soft launch of the revised and final HIV Action Plan is proposed for early March.

Issues

2. In response to the PfG commitments, Health Protection Division set up an HIV Action Plan Working Group, supported by three task-and-finish groups who focused on: stigma; peer support and living well with HIV; and PrEP and

prevention.

3. Membership of these groups came from a broad range of organisations including health boards, voluntary and community groups, academia and people living with HIV. All worked collaboratively and brought considerable expertise. Officials also worked closely with colleagues across Welsh Government, in particular LGBTQ+ policy leads who are developing an LGBTQ+ Action Plan for Wales.

4. Members considered current evidence and good practice and its relevance to Wales and initially put forward 26 actions (attached at Annex B, with postconsultation revisions highlighted) to help meet the Government's 2030 HIV elimination commitment and to tackle HIV-related stigma. The group recognised that stigma was largely driven through fear and ignorance and many people remain unaware that those living with HIV on effective treatment are no risk to others, therefore all efforts should focus on informing and educating. Fast Track Cymru and the Education sector will have a key role in supporting this, and in addition all those delivering support and care will be enabled to provide compassionate, holistic, and non-discriminatory care.

Objectives of the HIV Action Plan

- 5. The plan contains five priority areas for action:
 - Prevention
 - Testing
 - Clinical care
 - Living well with HIV
 - Tackling HIV-related stigma.
- 6. The actions were underpinned by the following three core principles aimed at

eliminating all HIV in Wales and achieving zero tolerance of HIV-related stigma by 2030:

- That there should be zero tolerance of HIV-related stigma
- That plans for implementation of new initiatives and services will be informed by, or developed with, people living with HIV. Alongside this there will be a recognition of contextual differences by sexuality, ethnicity, age, gender, and location, to ensure that no one is left behind
- That all new initiatives and services will be subject to ongoing monitoring and evaluation to make sure they meet the actions and principles laid out in the plan.

Consultation

7. As well as the many stakeholders who had been part of the development of the initial draft plan, officials wanted to ensure all stakeholders, as well as the public, had the opportunity to contribute and influence this plan for Wales. The plan was subject to a 12-week consultation period. Three stakeholder events (two virtual and one face-to-face) were also held during the consultation period to seek further views.

8. 55 responses were received during the consultation exercise. Given that many of the key stakeholders had had the opportunity to shape and influence the draft plan, this number was broadly in line with officials' expectations. Responses were overwhelmingly supportive of the plan and the proposed actions, but several responses did highlight certain gaps in the original plan and/ or potential areas for improvement.

9. Officials have amended the plan to take account of some of the suggestions and comments made in the consultation exercise. A number of the original actions have been tweaked and four new actions have been developed (see Annex B). These actions will not require additional funding but rather an expectation that services currently providing care will work together for a better patient experience going forward.

10. The amended plan was agreed by the Minister for Health and Social Services on 07 February 2023. It will be presented to a meeting of the reconvened HIV Action Plan Group on 09 February. If the Cabinet agrees, the final plan will now be published via a "soft" launch in early March.

- 11. The proposed main changes post-consultation are:
 - Timescales for completion of many of the key actions have been added to the plan.
 - A commitment has been added that the Minister for Health and Social Services make an annual statement to the Senedd on progress in implementing the plan.
 - Increased emphasis on the role primary care will have to play in the life course of HIV, this will include support for prevention initiatives, normalising testing for HIV, supporting provision for PrEP and being part of the multidisciplinary response for those who are ageing and have other illnesses.
 - A new action requiring all health boards to evidence that all children living with HIV are supported by multi-disciplinary teams and that their transition to adult services is seamless.
 - Two new actions on people ageing with HIV, highlighting the fact that as people with HIV now live longer, they will, as with all ageing populations, develop comorbidities and it is imperative that their care is joined up with regular multi-disciplinary team meetings.
 - A new action stating that the evidence base and current research undertaken in sexual health and HIV will be optimised and overseen by PHW and the Research Network from Welsh universities.
 - Actions on stigma have been strengthened, particularly in relation to care home and school settings.

Impact

13. The draft HIV Action Plan is predicated on the principle that all people should receive the full range of HIV services they need. Tackling HIV-related stigma across a range of sectors, notably, but not exclusively, the health and social care and education sectors, will be a major step towards removing the discrimination and the barriers faced by people of all ages living with HIV when accessing services. The plan also reinforces the benefit of those evidence-based interventions that have the greatest impact across the continuum of HIV services, including comprehensive, combination prevention to innovative and targeted HIV testing and the delivery of people-centred treatment and care. These interventions should ensure that those with, and those at risk of acquiring, HIV have positive health outcomes and a good quality of life. A positive difference will also be made to the lives of people in Wales living with HIV and in protecting current and future generations from the virus.

14. Contained within the HIV Action Plan are actions across the five priority areas for action aimed at achieving significant improvements to both the quality and accessibility of HIV services and HIV-related stigma. In so doing, it is anticipated that once implemented the plan will make an important contribution to ensuring there is parity (in terms of HIV testing and access to care) and to delivering the goals of the Well-being of Future Generations (Wales) Act 2015 (FGA), particularly its focus on building a healthier Wales. Also, action 22, which aims to ensure those living with HIV receive holistic, compassionate and non-discriminatory care, supports the FGA's goal of being a compassionate nation.

15. Progress on the implementation of the actions and outcomes will be monitored, reviewed and overseen by an Implementation Group which will be established in early 2023.

Communications and publication

15. The draft action plan and consultation was the subject of an oral statement in June, followed by a Senedd launch at an event arranged by the Terrence Higgins Trust to commemorate the 40th anniversary of Terrence Higgins's death. The launch attracted considerable media attention and was largely well received on social media. Given that the changes to the original plan are relatively minor, officials propose a soft launch in early March, with a written statement from the Minister for Health and Social Services focussing on the proposed additional actions, particularly those actions on ageing well with HIV, and children living with HIV.

Recommendation

Cabinet is asked to agree the HIV Action Plan and for the final plan to be published in early March.

Annex A: HIV Action Plan Statutory, Finance, Legal and Governance matters

Statutory Requirements

Integrated Impact Assessments have been completed for the Plan, with particular focus on the equality, data protection and health assessments which are all positive.

Finance Requirements and Governance Implications

Funding for a key action within the HIV Action Plan was agreed in MA/EM/1932/ 22 – Continuation of the Online STI Testing. The cost for the online STI testing is £3.885m, and will be accommodated within BEL 20, as part of the Draft Budget 2022. An announcement about this funding was made at the launch of draft HIV Action Plan in June 2022. MA/EM/1931/22 also highlighted that further costs were anticipated to take forward the actions in the final Plan.

The remaining actions with cost implications as referred to in the paragraphs above are set out in the table below:

Action	Costs	23-24 £m	24-25 £m
All-Wales Case Management System: Capital (Subject to further ministerial advice)	Approx. £920k in total (capital and revenue) for development of the new system	0	0.5
	£500k – software (capital)		
All-Wales Case Management System: Revenue	PHW estimate a range of £300-420k to cover personnel and the discovery/ research required to develop a successful platform.	0.42 (upper)	0.5

Action	Costs	23-24 £m	24-25 £m
	Approx. £500k for on-going support and maintenance in future years.		
Fast Track Cymru	£105k recurrent	0.105	0.105
Peer Support	Approx. £75k – £100k	0.075 to 0.1	0.075 to 0.1
Testing week	£50k	0.05	0.05
	Total Capital	0	0.5
	Total Revenue	0.675 (upper)	0.755 (upper

The H&SS Minister recently agreed the revenue allocations for 23-24 and 24-25 in MA/EM/3613/22. This will be funded from BEL 20 in the HSS MEG and the relevant budget transfer will allocate this funding to a new budget line in BEL 232 Targeted Health Protection. The capital funding of £0.5m for the All-Wales Case Management System has not yet been confirmed (NH2023/8642).

Due to the overprogramming of capital budgets as part of our new budgetary

policy and reserves position (first implemented through the multiyear Budget 2022-23 process) we will not be able to accommodate any requests from reserves. The Minister with budgetary responsibility for this activity will be required to ensure there is adequate cover for all financial asks associated with this request. On this basis, Budget and Government Business Division have cleared this paper (BGB/0795/6).

Colleagues in Digital Policy and Delivery Division are aware of the proposals for a case management system and are supportive. Similarly, Digital Health and Care Wales are supportive and will work with Public Health Wales in the development/discovery phase.

Legal Services

The Welsh Ministers have broad powers under the NHS (Wales) Act 2006 ("the 2006 Act") to introduce the initiatives and services suggested in the Action Plan. Under section 1 of the 2006 Act the Welsh Minister have a general duty to provide or secure the provision of services for the purpose of the promotion in Wales of a comprehensive health service, which includes securing improvement in the prevention, diagnosis and treatment of illness. The Welsh Ministers may, under section 2 of the Act, do anything which is calculated to facilitate, or is conducive or incidental to the discharge of such a duty. Additionally, section 3(1)(e) places a duty on the Welsh Ministers to provide throughout Wales, to such an extent as they consider necessary to meet all reasonable requirements, services and facilities for the prevention illness as they consider are appropriate as part of the health service.

Research and/or Statistics

There is no research or statistics contained in this paper, and clearance by Knowledge and Analytical Services is therefore not required/ All data contained

with the HIV Action Plan itself has been provided by Public Health Wales.

Joined up Working

The development of an HIV Action Plan and tackling HIV-related stigma are two of the actions in the recently launched LGBTQ+ Action Plan. Officials in Health Protection Directorate have worked very closely with LGBTQ+ policy leads on the development of this plan and the LGBTQ+ policy official was a member of the HIV Action Plan Group.

The vast majority of the actions contained within the plan relate to public health or healthcare. There is one education-centred action in the plan relating to the curriculum. This has been developed in conjunction with the relevant policy lead in the Education Directorate who sat on the HIV Action Plan Group.

Annex B: full list of actions post-consultation

Actions added post-consultation are highlighted in **bold**.

Action Description number

1. Building on the success of the Fast Track Cities initiative in Cardiff and the Vale, a new national umbrella body, Fast Track Cymru (FTC) will be established and funded by Welsh Government. This body will provide capacity and strategic focus for stakeholders, community groups and decision makers, in local fast track collaborations to support the implementation of this Action

Plan and ensure that all key partners work together to achieve our objectives.

Timescale: Full establishment by March 2024

- 2. Involvement of voluntary and community groups. In the implementation of this plan, Welsh Government, health boards, local authorities and other partners will work closely with the HIV voluntary and community sector.
- 3. A case management surveillance system, overseen by Public Health Wales, will be funded and established to support clinical management and improve shared care. It will facilitate real-time data collection and timely publication and will ensure decision makers can measures their achievements against ambitions.

Timescale: Funding to be made available in early 2023/2024 with implementation in 2024/2025

4. Health boards and trusts will be required to detail actions they are taking to implement the actions of the HIV Action Plan in their delivery plans. This will include evidence that care pathways are in place to ensure all those living with HIV from infancy to old age are living well and receiving optimum care. Progress can be reported at quarterly Quality and Delivery meetings between Welsh Government and health boards.

Timescale: Reporting on progress will commence in summer 2023 with the first annual Ministerial statement to the Senedd

5. To strengthen the evidence base, a network of researchers in academia in Wales, in collaboration with PHW, will be established and will coordinate current and future research in HIV and sexual health.

6. An HIV Action Plan Oversight Group, which will involve all key stakeholders including health boards, local government, clinicians, voluntary and community organisations and people living with HIV, will be established to monitor progress against our ambitions and to advise Ministers on progress and any further actions required. The Group will provide an annual progress update on the implementation of this plan, following which the Minister will make an annual statement to the Senedd.

Timescale: The Oversight Group to be established in the first quarter of 2023.

- **7.** Continue to deliver, develop and evaluate the "Ask me about PrEP" programme in Wales.
- 8. PHW, working with Fast Track Cymru collaborative networks and the voluntary and community sectors, will continue to support the wider use of, and diverse access to, PrEP (including the different regimens and formulations in development), through ongoing awareness raising for both the public and healthcare staff.
- **9.** Primary care and specialist sexual health services should develop and implement a shared care model to improve access and delivery of PrEP. This will enable PrEP to be provided in all health board areas, with particular emphasis on delivery in rural areas and in underserved communities. In addition, health boards and primary care clusters should explore how community organisations can support PrEP to develop a service that meets local needs.

Timescale: Task and Finish Group to be established to develop the shared care model and support its implementation – by March 2023.

10. We need to make every contact count. Testing should be in line with current BHIVA/BASHH/BIA Adult HIV Testing guidelines 2020 (HIV-testing-guidelines-2020.pdf (bhiva.org)).

Testing provided as opt out for patients attending certain healthcare settings will be monitored through regular audit.

PHW will provide a report on HIV prevalence in existing screening and testing programmes and make recommendations on specific population groups that would benefit from a seroprevalence study. The testing strategy may change depending on the outcome of this work.

Timescale: End of March 2023 for receipt of the initial report from PHW on HIV prevalence in existing screening programmes.

11. PHW will ensure that the online testing will continue to be made more accessible through the provision of sustainable funding for the existing online testing service including an option for rapid test and "click and collect" services. The online testing will be promoted more widely by PHW to tackle inequalities and the user journey improved.

NB: Sustainable funding has now been secured and efforts will now focus on wider accessibility. Future monitoring arrangements will be agreed by the Oversight Group.

12. A testing plan will be developed with Fast Track Cymru, health boards and voluntary and community partners to ensure no individual or community will be left behind when it comes to testing. This will include consideration of community HIV testing kits through community assets and groups, faith communities and support services to reach the needs of underserved populations.

Timescale: Summer 2024 for completion of plan

13. In collaboration with health boards and GP clusters, the GP "Texting for testing" pilot, which has operated successfully in certain areas of Cardiff, will be extended more widely throughout Wales.

All general practitioners should support HIV prevention initiatives, normalise HIV testing and ensure as a minimum they can signpost to the online testing service.

14. The all-Wales HIV testing week will be funded appropriately by Welsh Government for the duration of this action plan. Health boards, local authorities and partners will be expected to support this initiative.

Timescale: Annual funding provided to begin in 2023/2024

- **15.** Tackling late diagnosis will be made a priority. It will be mandatory that all late HIV diagnoses will be investigated and outcomes and lessons learnt reported to their health board and the HIV Oversight Group. The HIV Oversight Group will consider the outcomes of the investigations and agree actions to be taken to mitigate against further incidents.
- **16.** HIV awareness training will be mandatory for all front line healthcare staff. Training modules for clinicians will include raising awareness of the specific indicator conditions when HIV testing must be undertaken.

Timescale: training package to be developed by Autumn 2023

17. All services providing HIV care in Wales should review their staffing structure, supporting and protecting the HIV workforce. They need a skilled workforce to provide care to more complex cases, re-engage with positive individuals lost to care and can reach out to underserved populations.

A focus must be maintained on those actually or potentially lost to care over the life of the plan. Care will be delivered in accordance with BHIVA Standards of Care for Living with HIV and BHIVA national guidance. This will involve innovative ways of working, and the co-production with PLWHIV, of care pathways with a focus on underserved populations.

18. All health boards are expected to evidence that all children and young people living with HIV are supported by multi-disciplinary teams and that their transition to adult services is seamless.

Pregnant women who are HIV positive must also be supported by a multidisciplinary team.

- 19. As people with HIV now live longer, they will, as with all ageing populations, develop comorbidities. It is imperative that their care is joined up with regular multi-disciplinary team meetings. Social care will need to be part of the dialogue where appropriate. See also action 22.
- 20. All newly diagnosed individuals with HIV should be seen within a specialist HIV service within two weeks of diagnosis. All should be offered peer support and fully supported to remain in clinical care, as well as having access to psychological support.

All efforts should be made to identify close contacts of HIV positive individuals so that they can be offered testing within two weeks, and on-going support.

21. Those living with HIV will be empowered to better self-manage their health through participation in the Positive Self-Management Programme (PSMP) provided by EPP Cymru, PHW.

Timescale: Summer 2023 for integration within this programme.

- 22. As those living with HIV age over time it is important that they receive holistic, compassionate and non- discriminatory care, and that all who provide care and assistance are supported in delivering this.
- 23. A national peer support programme for Wales will be commissioned by Welsh Government, following the now concluded research work carried out by Cardiff University into the potential principles and structures of such a programme. This peer support network will provide support to all those living with HIV that require it. A working group will be established to design the programme.

Timescale: End of March 2023 for establishment of the group.

- 24. Fast Track Cymru and its local networks working with voluntary and community groups should support health boards and local authorities to engage meaningfully with all diverse communities including ethnic minorities and faith groups so that testing for HIV is accepted, stigma is reduced and those living with HIV are supported to live better lives.
- **25.** An HIV awareness training programme will be developed collaboratively, to address misunderstanding and stigma in the healthcare sector, and which will be mandatory for all healthcare providers.

Timescale: Autumn 2023

26. Social Care Wales will adapt this training programme for use in the social care sector and develop a plan for its delivery to all social care workers. Through this awareness raising, all care home providers should be confident that they can provide for the needs of those who are living with HIV and that no stigma will be attached to their diagnosis or care.

Timescale: Autumn 2023

- 27. The message that people living with HIV on effective treatment can't pass it on to a sexual partner will be promoted widely and all HIV training modules will be consistent with this message.
- 28. Mandatory Relationships and Sexuality Education (RSE) will support learners to develop the knowledge and understanding of the causes, symptoms and impact of conditions such as HIV. (Cross-cutting themes for designing your curriculum Hwb (gov.wales)

High quality curriculum resources for schools will support learners with an aim to effectively address HIV, PrEP and stigma. We want all children living with HIV to have the support that meet their needs with no stigma attached to their diagnosis.

Timescale: This work to be commissioned by March 2024.

- **29.** FTC will work with collaborating organisations and the advocacy network to ensure that awareness of stigma and the promotion of positive messages such as U=U and zero tolerance is a common and ongoing thread in their day-to-day work.
- **30.** PHW, working with partner organisations and people living with HIV, will introduce and promote an annual Wellbeing Survey of People Living with HIV to monitor whether change has been affected and is effective.

Timescale: 2023 baseline year / 2024 for pilot of survey and collection of baseline data.

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