



## HIV Testing in the Emergency Department

### Why am I having an HIV test today?

- Most people who are having bloods taken in the Emergency Department will have a HIV test taken as well. This is because Bromley and the surrounding boroughs have high rates of HIV infection. We routinely do the test as a person living with HIV may not develop symptoms for a long time and it is better to be diagnosed earlier to allow treatment to be started.
- There is no reason why people in the UK should get sick or die from HIV.
- One of the most common reasons why they do is not know they have HIV.

### Can HIV be treated?

There is no cure but with the right treatment, a person can live a normal life expectancy. Treatment also prevents transmission to others.

### What happens to my results?

If your result is positive, the results team will contact you and discuss what happens next.

If we do not contact you, it usually means your result was negative.



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## The commissioning and funding landscape is changing.

*South London ICSs and tertiary providers have taken the opportunity to work collaboratively to integrate specialised services and deliver an end to end pathway approach for patients.*

## National specialised commissioning update

In line with national policy, the portfolio of delegated services is expected for release this month by NHS England.

It will define which services will be delegated to ICSs, which will be maintained at national commissioning level (highly specialised services, or HSS) and any services for potential future delegation.

The national NHS England team continue to adapt the pre delegation assessment framework (PDAF) ahead of its publication in response to stakeholder input. The PDAF will indicate criteria against which ICBs will be assessed for their readiness to take on delegated commissioning. A roadmap will also be released with the PDAF.



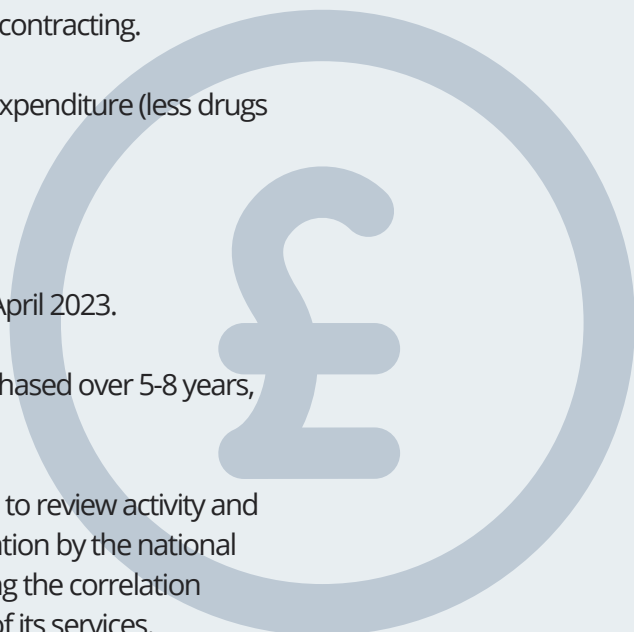
# Finance update

NHS England is currently working on proposals for finance and contracting.

ICB allocations have been shared. They are based on 2019/20 expenditure (less drugs and devices) plus growth.

There are three main finance updates from NHS England:

- NHS England will move to population based funding from April 2023.
- A revised timetable for implementation has been agreed, phased over 5-8 years, which aims to provide a cap to large scale provider impact.
- There is currently a national rebasing exercise for providers to review activity and associated costs. This information will be used for reconciliation by the national team. It is hoped that this will balance the system, increasing the correlation between what a provider spends and what it is paid for all of its services.



## Programme Board

A Programme Board meeting was not held in April. The next one will be held 24 May.

## National timeline

- **May 2022**
  - Publication of the service portfolio, designating those services delegated to ICSs and those retained by NHS England
  - Publication of the pre delegation framework and road map, to include an assessment of ICS readiness for delegation
- **July 2022**
  - Establishment of Integrated Care Boards (ICBs)
- **October 2022**
  - Review of delegated service portfolio (as above)
  - Confirmation of 2023/24 governance arrangements
  - Integration of specialised service assurance into the NHS Systems Oversight Framework (SOF) to provide ICSs with structure and functions needed

Quarterly reviews will monitor integration progress and evolution.

The South London programme team remains involved in the shaping of this work through national working groups within the Future Commissioning Model Programme.

# South London pilots IN FOCUS: HIV

## Implementing opt out HIV testing in London

A key recommendation from the plan included opt-out HIV testing in emergency departments (EDs) in high prevalence areas for patients who are already having blood tests.

A patient is informed if their result is reactive and are invited back to the hospital for confirmatory tests with a specialist team. By identifying HIV early, patients can be offered lifesaving treatment, which also prevents onward HIV transmission by reducing viral load to undetectable and untransmittable levels.

To facilitate this, the government committed £20 million over the next three years to London, Brighton and Manchester. These areas were selected for their high levels of HIV prevalence (2-5 people diagnosed per 1,000 or more).

In South London, all areas are considered high or extremely high HIV prevalence areas.

Services had been piloted on short term funding in several places in South London, demonstrating the success of the concept and supporting the national proposals.

## Towards zero: HIV transmission and related deaths

In December 2021, the government launched **Towards Zero, the HIV Action Plan** for England – 2022 to 2025, setting out a roadmap for ending HIV transmission and HIV and AIDS-related deaths in England by 2030.

The funding allocated to ICSs to run opt-out HIV testing is based on ED activity. South East London and South West London ICSs have invested additional funding in 2022/23 to ensure service roll out as fast as possible, a comprehensive standard, and adoption of a *lost to follow up* service on a phased basis to achieve *zero transmission* for South London populations.

## PRUH launches HIV testing in ED

The Princess Royal University Hospital (KCH) launched HIV testing in their ED on 21 April, achieving a **73% testing rate** in their very first week -- **645 patients** had an HIV test of 880 patients who needed a blood test in ED.

This level of uptake is unanticipated for the first week of such a testing programme, and is likely thanks to Dr Dilhan Perusinghe running education sessions and continuing to flag the importance of HIV testing at handovers.

Larissa Mulka, HIV ED Testing Lead said, "ED HIV testing is a crucial tool in... identifying and engaging individuals that may not have awareness of HIV testing or easy access to care, helping to reduce health inequalities [and] reduce stigma around testing."



[Download the KCH HIV patient flier](#)



Jocelyn, PRUH senior sister in ED

# South London pilots

## IN FOCUS: HIV

### About the HIV pilot (two parts)

*(links to overview)*

**Comprehensive HIV screening in emergency departments** – This aims to use opt out testing in emergency departments (EDs) to help identify and treat people with HIV. Early detection is vital to ensure better outcomes for patients. On appropriate treatment, people with HIV will live as long as someone without it and those with undetectable viral loads will not pass on the virus.

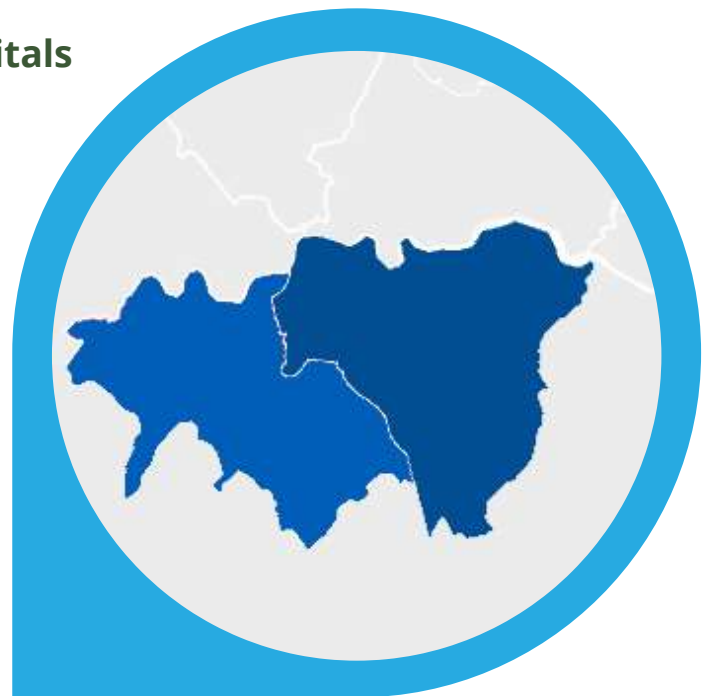
**Establishing lost to follow up services to re-engage people in care** – Many people living with HIV are vulnerable with complex needs. Some people living with HIV disengage with their care. By finding and re-engaging people who know their status, we can help them remove barriers to their care, as we work towards our goal of zero transmissions by 2030.

## Opt out HIV testing in South London hospitals

### South East London

All trusts have opt-out HIV testing in their EDs.

- Guy's and St Thomas' NHS Foundation Trust (St Thomas' Hospital since 2015)
- King's College Hospital NHS Foundation Trust (Denmark Hill since 2016)
- Lewisham and Greenwich NHS Trust (University Hospital Lewisham since 2018; Queen Elizabeth Woolwich Hospital since 2018)
- Princess Royal University Hospital (PRUH, part of KCH) launched opt out testing on 21 April 2022. ED, HIV and laboratory colleagues worked with a project manager to establish this service.



### South West London

All trust have opt-out HIV testing in their EDs.

- St George's University Hospitals NHS Foundation Trust (St George's Hospital, since 2018)
- Epsom and St Helier University Hospitals NHS Trust (St Helier Hospital, since 2019; Epsom Hospital to launch May 2022)
- Croydon Health Services NHS Trust (Croydon University Hospital since 2020)
- Kingston Hospital NHS Foundation Trust (Kingston Hospital since 2021)

Clinicians from all South London hospitals are committed to improving HIV testing uptake to an ambitious 90% of all patients who have their blood taken in ED.

HIV Clinical Leads meet regularly with members of the South London Specialised Services team to discuss barriers to testing uptake, retaining patients in care and how to reduce lost to follow up.



# South London pilots

## Neurology

### About the pilots

*(links to overview)*

**Managing chronic conditions** – Focussing on case management of the four most common chronic neurological conditions that span the CCG / specialised divide -- epilepsy, Parkinson's, multiple sclerosis (MS), and neuromuscular disorder (NMD) -- this pilot will allow rapid care for patients closer to home, plus workforce support for seamless patient navigation.

**Establishing a regional FND service** – Functional neurological disorder (FND) can be challenging to diagnose by non specialists, and accounts for 10-15 per cent of outpatient neurology appointments. The pilot aims to better detect and manage these patients once diagnosed, for improved outcomes, experience, and efficiencies, plus an MDT service with intensive assessment and rehabilitation across a coordinated, regional system of care.

### Progress update

The team have collated baseline data and are developing an evaluation framework for the pilot.

They have identified a need for three roles within the pilots: two clinical roles (one in NMD, one in epilepsy), and a collaboration manager, which is open for recruitment (*see below*).

The team have been engaging with subspecialty network leads to agree an approach to coordinating these pathways.

**Two pathways are going live next month -- epilepsy and NMD.** These will be followed by Parkinson's and MS pathways.

### Now recruiting: Neurosciences Collaboration Manager

Recruitment is now open for a Neurosciences Collaboration Manager to lead on the overall programme management and delivery of the Neurology specialised commissioning delegation pilot, a key deliverable of the South West London and Surrey Neurosciences Network (SWLSNN) transformation programme.

The post holder will develop and deliver the strategic and operational plans to achieve the pilot objectives effectively and to time, ensuring that the necessary infrastructure and expertise is available to meet the needs of the agreed work plan.



[Link to advert](#) | Closes 19 May

## Cardiac

### About the pilots

*(links to overview)*

**Addressing ethnic inequalities in treatment of aortic stenosis** – This pilot aims to improve primary care detection, address variances in access and intervention rates in diverse communities, and streamline the pathway with a single point of entry. The team is undertaking extensive engagement with Black African and Caribbean communities to understand and address access and treatment variations within diverse populations.

**Developing an OPAT service** – Many patients that are medically and surgically fit stay in hospital only to complete long courses of IV antibiotics (up to 6-8 weeks). This pilot aims to treat appropriate patients safely and consistently in the community through an outpatient parenteral antimicrobial therapy (OPAT) service. The model is in place at St George's and St Thomas' hospitals. The pilot will support expansion to King's College Hospital patients.

### Progress update

The team has identified the 10 most diverse GP practices in South London and are working with local primary care leadership to agree a mobile echo clinic offering.

Simultaneously, the team is working with a charity ([Heart Valve Voice](#)), a community interest company ([Mabadiliko](#)) and a clinical organisation ([Valve For Life](#)) to increase public education and awareness of valve disease.

Clinical leads have reviewed data and undertaken pathway mapping for pathways. Criteria has been developed for selection of a potential home care provider, and engagement with providers has commenced to understand their propositions. A business case for required workforce to implement the pilot has been submitted through KCH internal channels, with final board review this month.

**Developing a regional mitral valve service** – This pilot aims to develop a network mitral valve team to address the existing inequities of access to innovative mitral valve procedures, such as thoroscopically assisted (minimally invasive) mitral valve surgery and percutaneous edge-to-edge mitral valve repair.

Clinicians have agreed a South London model that provides for a networked team working across sites as a “team without walls”. Joint reporting across sites will ensure high quality and standardised care. NHS England London region has reviewed commissioning arrangements for certain procedures. The team will next establish a regular MDT for South London for optimal input on patients.

# South London pilots



## Renal

### About the pilots

*(links to overview)*

**Early identification and management of chronic kidney disease (CKD)** – This pilot aims to prevent kidney failure, reduce cardiovascular events and reduce dialysis numbers by identifying and managing chronic kidney disease early. This can prevent or delay worsening kidney function. Two ways to do this are greater urinary testing of albumin to creatinine ratio (ACR) and coding of CKD. Additionally, changes to NICE guidance in the use of dapagliflozin to treat CKD are expected, which could broaden their use in these patients.

### Progress update

Given a financially challenging environment, the team is exploring options and sources to fund the renal pilots.

### **Development and extension of supportive care** –

This pilot aims to provide patients with non dialysis treatment options to manage their end stage renal failure where appropriate. This will promote more informed shared decision making and offer care that suits each patient's needs.

## Feedback welcome

Want to know more about the South London Specialised Services Delegation Programme?

We can present more information to you and your colleagues!

### Let us know!

Please direct questions to  
Andrea Marlow  
([andrea.marlow@gstt.nhs.uk](mailto:andrea.marlow@gstt.nhs.uk)).

### Network resource

**Source4Networks** - A free platform committed to curating and sharing the most comprehensive and best knowledge around network leadership in health, social care, and charity sectors.

[www.source4networks.org.uk](http://www.source4networks.org.uk)

### The South London programme includes:

- Our Healthier South East London ICS
- South West London Health and Care Partnership ICS
- Guy's and St Thomas' NHS Foundation Trust
- King's College Hospital NHS Foundation Trust
- St George's University Hospitals NHS Foundation Trust