

Appendix 1 – Overview of Current Delivery

Sexually transmitted infections (STIs) remain a significant public health concern both nationally and locally with persistent rates observed among young people aged 15–24 and other vulnerable populations. Recent data from 2024 indicates that this age group continues to account for a disproportionately high number of new STI diagnoses, particularly chlamydia and gonorrhoea¹.

Contributing factors include increased sexual activity, lower rates of condom use and barriers to accessing timely sexual health services. Vulnerable groups - including individuals experiencing socioeconomic disadvantage, LGBTQ+ communities and those with limited access to healthcare, also face elevated risks. These trends highlight the continuing need for targeted prevention, early intervention and inclusive service delivery to reduce transmission and improve sexual health outcomes across the borough.

The tables below present key sexual health indicators for Cheshire East, focusing on STI rates (including chlamydia, syphilis and gonorrhoea). These notifiable infections are key indicators of sexual health. In Cheshire East, these trends are monitored through local sexual health profiles to inform targeted public health strategies. Nationally, they align with UK Health Security Agency and NHS England priorities to reduce health inequalities and improve sexual and reproductive health outcomes.

Note – the tables below show major Public Health indicators¹. The values given are the age standardised rate which are adjusted for population demographics, meaning a fair comparison between areas can be made.

STI Testing Overview (2024)

Key Insights:

| | Cheshire East | England | Comparison |
|--|-------------------|-------------------|---------------------|
| STI testing rate (excluding chlamydia, aged <25) per 100,000 | 2,907 per 100,000 | 4,088 per 100,000 | Worse than England |
| STI testing positivity (excluding chlamydia, aged <25) | 5.8% | 6.4% | Better than England |

- The STI testing rate for under-25s (excluding chlamydia) is lower in Cheshire East than the national average, which may suggest less engagement with testing services or lower service availability. Therefore, there is an opportunity in the recommissioning work, to look at how engagement can be enhanced, such as by targeted outreach and improved service visibility.
- STI testing positivity is lower in Cheshire East than England. This could reflect more effective local prevention work.

Service Level Data:

- 100% of patients requiring a face-to-face appointment received it within 2 working days in 24/25, whereas 86% of those requesting an online test received it within 2 days.
- 100% of patients contacting the service with an urgent care need received support or assessment on the same day.
- The number of tests undertaken by residents has increased by 12.5% in 24/25, whilst positive results have decreased by 15%.
- 93% of patients received their test results back within 8 working days. Note: these results are skewed by the longer wait for herpes results and users not providing contact details. 99% of online patients received their test results within 48 hours from the time the sample was received.
- The number of patients aged 19 and under attending the service in Cheshire East has increased during the last year by 30% compared to the previous year.

¹ Sexual and Reproductive Health Profiles | Department of Health and Social Care, data is for 2024 unless indicated

Chlamydia & Syphilis Indicators (2024)

| Indicator | Cheshire East | England | CE Comparison |
|---|-------------------|-------------------|----------------------|
| Chlamydia Detection rate (Females aged 15–24) | 1,315 per 100,000 | 1,589 per 100,000 | Worse than England * |
| Proportion of females screened for Chlamydia (aged 15–24) | 14.2% | 18% | Worse than England |
| Chlamydia Diagnostic rate (per 100,000) | 73 | 124 | Better than England |
| Syphilis diagnostic rate | 15.8% | 16.5% | Similar |

Key Insights

- * Chlamydia detection rate is a counterintuitive indicator, as to score better, more cases must be identified. This disregards effective prevention efforts and associated lower transmission rates locally.
- The local screening proportion for chlamydia (females 15–24) at 14.2%, reflects significant engagement with young people, including focused campaigns. There is the potential to close the gap with England through additional outreach, education and school/college partnerships.
- Syphilis diagnostic rates are comparable between Cheshire East and England, indicating:
 - stable surveillance and consistent diagnostic activity
 - effective monitoring and control measures are in place.
- General Practitioners in Cheshire East are actively involved in delivering the chlamydia screening programme for under-25s, alongside other sexual health services such as LARC and IUD provision.

Gonorrhoea & Genital Warts Indicators (2024)

| Indicator | Cheshire East | England | CE Comparison |
|---|---------------|---------|---------------------|
| Gonorrhoea Diagnostic rate per 100,000 | 73 | 124 | Better than England |
| Genital warts diagnostic rate per 100,000 | 36.4 | 43.4 | Better than England |

Key Insights:

- Recent data shows that Cheshire East's STI diagnostic rate stands at 73 per 100,000, notably lower than the national average of 124 per 100,000. This suggests a lower local prevalence. Importantly, it provides a clear baseline for expanding outreach and testing initiatives, particularly among under-tested groups, to support early detection and treatment.
- Nationally, Gonorrhoea diagnoses have been steadily rising since the early 2000s, with a temporary dip during the COVID-19 pandemic due to reduced testing.
- The highest rates of Gonorrhoea are seen among gay, bisexual and other men who have sex with men (GBMSM), who account for nearly half of all diagnoses in 2022. Cheshire East reflects this national pattern.
- There is an increasing diagnostic trend which is a concerning development from a public health perspective and reflects patterns observed across all regions in England. In response, the UK launched a world-first national gonorrhoea vaccination programme in August 2025. Axcis Cheshire East is implementing this initiative by targeting high-risk groups, including gay, bisexual, and other men who have sex with men (GBMSM), as well as individuals with recent bacterial STIs or multiple sexual partners. Staff are being trained to deliver the vaccine opportunistically during routine sexual health consultations.
- Genital warts are the third most commonly diagnosed sexually transmitted infection (STI) in the UK and are caused by infection.

Long-Acting Reversible Contraception (LARC) Indicators (2023)

LARC uptake is a key indicator of effective contraceptive provision. These methods are highly reliable, long-lasting and reversible, helping to prevent unintended pregnancies i.e. intrauterine device (Coil)/contraceptive pill/implants. Monitoring LARC usage reflects service accessibility, supports health equity and informs commissioning and workforce planning. This data helps to assess the quality and reach of reproductive health services, testing activity and contraception usage.

| Indicator | Cheshire East | England | CE Comparison |
|---|---------------|---------|---------------------|
| Total prescribed LARC (excluding injections) per 1,000 | 50.1 | 43.5 | Better than England |
| Sexual and Reproductive Services prescribed LARC (excluding injections) per 1,000 | 18.1 | 18 | Similar |

Key Insights:

- Cheshire East demonstrates strong performance in LARC provision, with a total prescription rate of 50.1 per 1,000 population, significantly higher than the national average of 43.5. This suggests an effective local service and strong public engagement with long-term contraceptive options.
- The rate of LARC prescriptions through sexual and reproductive health (SRH) services in Cheshire East is 18.1 per 1,000, closely aligned with the national figure of 18 per 1,000. This consistency indicates that local SRH services are performing on par with national standards, ensuring equitable access to contraception.
- Just under 10% more implants have been inserted in 24/25 in comparison to the previous year.
- Higher uptake of LARC methods is associated with reduced rates of unintended pregnancies and improved reproductive health outcomes. Cheshire East's performance reflects effective service delivery, proactive patient engagement and a commitment to accessible, high-quality contraceptive care.
- LARC provision is subcontracted to local GP practices, extending the reach and accessibility for local residents.

HIV Indicators (2023)

| Indicator | Cheshire East | England | CE Comparison |
|--------------------------------|---------------|---------|---------------------|
| HIV Testing Rate | 2,056 | 2,770 | Worse than England |
| HIV Diagnosis Rate per 100,000 | 7 | 10.4 | Better than England |

Key Insights:

- Approximately 113,500 people are living with HIV in the UK with 100,063 individuals accessing HIV care in England (national overview). In Cheshire East, 308 people were living with diagnosed HIV in 2023. This equates to a rate of 0.63 per 1,000 population aged 15–59, which is lower than many other areas in England.
- Around 4,700 people in England are estimated to be living with undiagnosed HIV. However, treatment coverage is high, with 98% of diagnosed individuals receiving care and 98% of those treated being virally suppressed, meaning they cannot transmit the virus sexually.
- HIV treatment and care in Cheshire East has been a standout area of success locally. The integrated approach has ensured consistently high testing rates, particularly among gay, bisexual and men who have sex with men. The treatment programme has included innovative express clinics and community outreach, leading to almost 400 people accessing treatment.

- Cheshire East is part of the Cheshire and Merseyside Fast Track Cities programme, aiming to end new HIV transmissions by 2030. This is a collaborative initiative, which brings together local councils, NHS services, community organisations and people living with HIV to improve prevention, testing, treatment and support.