

Paul Sweeney MSP Member of the Scottish Parliament for Glasgow Region

Neil Gray MSP
Cabinet Secretary for Health and Social Care
Scottish Government
St Andrew's House
Regent Road
Edinburgh
EH1 3DG

Cc: Jenni Minto MSP, Minister for Public Health and Women's Health and Richard Angell OBE, Chief Executive of Terrence Higgins Trust

12 March 2025

Dear Cabinet Secretary,

We are writing as elected representatives of Glasgow who are committed to Scotland's ambitious goal to end new transmission of HIV by 2030.

We can all be proud of the progress that Scotland has made in addressing the HIV epidemic. Early action to make HIV prevention drug, PrEP, available through the NHS and recent campaigns to raise awareness of HIV have helped to drive down new transmissions of the virus and to address the stigma that can still surround a HIV diagnosis.

Despite this progress, our shared goal of ending new HIV cases is in jeopardy. Without urgent action, Scotland is at risk of falling behind other UK nations in our HIV response. HIV testing rates in Scotland are still lagging behind pre-pandemic levels, with the number of people accessing a HIV test in a sexual health setting decreasing by 19% between 2019 and 2023. Rates of new HIV diagnoses have also increased to their highest level since the COVID-19 pandemic. If we are to succeed in achieving our 2030 goal, we must find the 500 people living with undiagnosed HIV in Scotland and the 1,115 people who are living with HIV but are no longer accessing lifesaving treatment and care.

That is why we are writing to urge you to introduce emergency department opt-out HIV and hepatitis testing in Glasgow. This approach has been a phenomenal success elsewhere in the UK. In London, Brighton, Manchester and Blackpool, more than 4,000 people with HIV, HBV and HCV have been found through opt-out testing in only 18 months, including 934 people who were living with undiagnosed HIV or had been disengaged from HIV care.

Not only is this intervention changing lives, but it is helping to tackle health inequalities and relieve long-term pressure on the NHS. At Croydon University Hospital, opt-out testing brought the average hospital stay for people newly diagnosed with HIV down from 34.9 days to 2.4 days, because people were being tested earlier and getting on to effective treatment. Crucially, this approach is tackling

health inequalities, disproportionately finding groups more likely to be diagnosed late with HIV in other services: people of Black African ethnicity and people from deprived areas.

As a result of this success, the UK Government is expanding opt-out HIV testing to all A&E's in high HIV prevalence areas in England and in December invested £27 million to extend the programme beyond April 2024. Hospitals in cities with a high HIV prevalence are joining the programme, even if the wider local authority area has a low prevalence of HIV. This is bringing the total number of hospitals funded to routinely test anyone who has their blood taken in their emergency department for HIV to 89. As more and more hospitals in England adopt this approach, it is concerning that hospitals in cities with an equivalent HIV prevalence in Scotland are not benefitting.

As you will know, NHS Greater Glasgow and Clyde has among the highest HIV prevalence of any health board in Scotland, with 32% of people living with HIV in Scotland residing in this area. The health board has also had the highest number of new HIV diagnoses in Scotland since 2014 and was home to the UK's largest outbreak of HIV among people who inject drugs in three decades. Glasgow is therefore uniquely suited to spearhead bold interventions to identify new HIV cases and re-engage people in HIV care.

Testing is the only way to know your HIV status and an expansion of HIV testing must be central to Scotland's route to ending new cases. Every day that emergency department opt-out HIV testing is not on offer, opportunities to find and support people living with HIV are being missed. If we are to meet our ambitious 2030 goal, innovative, evidence-based, approaches must be taken to expand testing and tackle barriers to treatment and support.

The opt-out testing programme has the opportunity to save lives in Glasgow. We are writing to urge you to match your ambition with bold action. If we are to succeed in ending new cases of HIV in Scotland by 2030, this action cannot wait.

We look forward to hearing from you.

Yours sincerely,

Paul Sweeney MSP, Glasgow Region

Anas Sarwar MSP, Glasgow Region

Annie Wells MSP, Glasgow Region

Gordon McKee MP, Glasgow South

John Grady MP, Glasgow East

Martin Rhodes MP, Glasgow North

Maureen Burke MP, Glasgow North East

Pam Duncan-Glancy MSP, Glasgow Region

Patrick Harvie MSP, Glasgow Region

Pauline McNeill MSP, Glasgow Region

Patricia Ferguson MP, Glasgow West

Dr Sandesh Gulhane MSP, Glasgow Region