Implementation of HIV PrEP in Scotland: Second Year Report

17 December 2019
This is an Experimental Statistics publication

Experimental statistics are official statistics which are published in order to involve users and stakeholders in their development and as a means to build in quality at an early stage. It is important that users understand that limitations may apply to the interpretation of this data, further details of which are presented in this report.

All official statistics should comply with the UK Statistics Authority’s Code of Practice which promotes the production and dissemination of official statistics that inform decision making. Once the evaluation is completed and an enhanced report is developed that meets the needs of users and stakeholders, the Experimental label will be removed.

Find out more about the Code of Practice at:

Find out more about Experimental Statistics at:
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Introduction

In Scotland, as of 30 June 2019, a total of 5,484 individuals have been diagnosed and are living with HIV, of whom almost three quarters (73%, 4,024) identify as male and the remaining 27% (1,460) as female.\(^1\) Between 1 January and 30 June 2019, 184 new reports of HIV diagnoses were recorded; of these, 96 (52%) were first-ever diagnoses and the remaining 88 were newly reported in Scotland, but previously diagnosed elsewhere.\(^1\) Condomless sexual contact among men who have sex with men (MSM) remains the main route through which new HIV infections are acquired in Scotland (38% in the first six months of 2019 compared with 23% among heterosexuals and 8% among people who inject drugs (PWID)).\(^1\)

Access to, and uptake of, HIV treatment in Scotland is very good; to the end of December 2018, it was estimated that 91% (5,352/5,881) of individuals living with HIV had been diagnosed and, of these, 90% (4,799/5,352) were receiving antiretroviral therapy (ART), of whom 94% (4,530/4,799) had achieved an undetectable viral load (<40 copies per millilitre of blood).\(^2\) In this regard, Scotland has achieved the UNAIDS ‘Fast Track’ 90-90-90 targets (90% of HIV infected individuals have been diagnosed and, of these, 90% are receiving antiretroviral therapy and, of these, 90% have achieved an undetectable viral load) set for 2030.\(^3\)

The numbers (and proportions) of diagnosed individuals attending for care, receiving ART and achieving viral suppression in Scotland are high; however, there is evidence that new transmissions are occurring. Between 1 January and 30 June 2019, 24% (14/59) of first ever diagnoses recorded (and for which avidity testing information was available) had been acquired in the previous three to four months, highlighting the importance of prevention efforts and early and more frequent testing opportunities.\(^1\)

Since July 2017, following approval by the Scottish Medicines Consortium, HIV prevention interventions in Scotland have been strengthened by the implementation of a national programme to make HIV pre-exposure prophylaxis (PrEP), a tablet to prevent HIV transmission, available via the NHS. PrEP is free to those individuals who are at high risk of acquiring HIV through sexual transmission, as assessed using eligibility criteria (Appendix 1). Scotland is the first country in the UK, and one of the first worldwide, to implement an NHS-funded HIV PrEP programme to individuals who meet risk-based eligibility criteria alongside comprehensive STI and HIV prevention services. The programme is delivered through existing sexual health services. A detailed first year report, describing the uptake and impact of the programme to 30 June 2018, was published in February 2019.\(^4\) This report describes and updates the uptake of the HIV PrEP programme in Scotland to the end of its second year.
Main Points

- In the first two years of Scotland’s PrEP programme (1 July 2017 to 30 June 2019), a total of 11,289 PrEP prescriptions were recorded on the National Sexual Health (NaSH) IT system, an electronic patient record used in mainland NHS boards; this corresponds to 3,354 individuals who received one or more PrEP prescriptions during this two year period.

- Approximately 100 new individuals have started on PrEP each month since January 2019.

- By the end of the second year of the programme, PrEP had been prescribed in all 11 mainland NHS boards; the largest proportion (41%, 1,364/3,354) of PrEP recipients attended clinics in NHS Greater Glasgow & Clyde with a further 25% (850) attending services in NHS Lothian. At the time of publication, no data were available for the three island NHS boards.

- Of the 3,354 individuals prescribed PrEP at least once between 1 July 2017 and 30 June 2019, almost all were male (99%, 3,317) and, of these, 98% (3,266/3,317) were men who have sex with men.

- Of 3,587 eligibility codes recorded on NaSH for 3,108 PrEP recipients, the majority (77%, 2,776/3,587) indicated eligibility based on the individuals’ sexual behaviour (i.e. reported condomless penetrative anal intercourse with two or more partners in the last 12 months with the likely risk of doing so in the next three months).

- Of the 3,354 PrEP recipients recorded, more than one third (39%, 1,318) had no sexual health service attendance recorded in the two years prior to the roll-out of the PrEP programme. One quarter (27%, 910) of all PrEP recipients had no attendance recorded at any time prior to initiation of the programme, indicating that a proportion of non-attending individuals at high risk of sexual acquisition of HIV have engaged with services since its implementation.
Results and Commentary

Uptake of HIV PrEP

To monitor the implementation of the PrEP programme across Scotland, new clinical coding was developed for PrEP-related attendances. Coding was recorded using the previously employed Sexually Transmitted Infections Surveillance System (STISS) coding function within the Scottish National Sexual Health (NaSH) patient management system. This new coding system enables clinicians to record relevant information on NaSH during and following PrEP-related patient consultations.

In the first two years of Scotland’s PrEP programme (1 July 2017 to 30 June 2019), a total of 272,551 individuals were recorded via the National Sexual Health (NaSH) patient management system as attending sexual health services. Of those attending, 6% (17,098) were men who reported ever having sex with other men and were attending for any reason during this period. Sexual health services in the three Scottish island NHS boards do not currently use NaSH for the purposes of patient management and, therefore, individuals attending services in these areas are not included in the aforementioned totals. PrEP prescribing data from non-NaSH using island NHS boards are collated locally.

As of 30 June 2019, a total of 11,289 PrEP prescriptions were recorded on NaSH; this corresponds to 3,354 individuals who received one or more PrEP prescriptions during the two year period of the PrEP programme (Figure 1). By comparison, at the end of Year 1 (1 July 2017 to 30 June 2018) 1,872 individuals had been prescribed PrEP on at least one occasion with a total of 4,432 PrEP prescriptions being recorded.4

Following implementation of the programme on 1 July 2017, the number of individuals being prescribed PrEP for the first time rose steadily in the first four months of the programme, peaking in October 2017 with 211 individuals starting on PrEP. Numbers have since stabilised with approximately 100 new individuals starting on PrEP each month since January 2019 (Figure 1).
Figure 1: Number of i) prescriptions, ii) individuals prescribed PrEP for first time, and iii) individuals ever prescribed PrEP, Scotland, 1 July 2017 to 30 June 2019.

By the end of the second year of the PrEP programme, PrEP had been prescribed in all 11 of the mainland NHS boards. Of the 3,354 individuals prescribed PrEP at least once during this period, the largest proportion (41%, 1,364) attended clinics in NHS Greater Glasgow & Clyde with a further 25% (850) attending services in NHS Lothian, 8% (285) in NHS Grampian and 6% (211) in NHS Tayside (Table 1). Smaller proportions were recorded across the remaining seven mainland NHS boards.
Table 1: Number and proportion of individuals prescribed PrEP by NHS board of clinic, Scotland, 1 July 2017 to 30 June 2019.¹

<table>
<thead>
<tr>
<th>NHS Board of Clinic</th>
<th>Number of PrEP Recipients</th>
<th>Proportion (%) of PrEP Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ayrshire &amp; Arran</td>
<td>110</td>
<td>3.3</td>
</tr>
<tr>
<td>Borders</td>
<td>42</td>
<td>1.3</td>
</tr>
<tr>
<td>Dumfries &amp; Galloway</td>
<td>44</td>
<td>1.3</td>
</tr>
<tr>
<td>Fife</td>
<td>127</td>
<td>3.8</td>
</tr>
<tr>
<td>Forth Valley</td>
<td>103</td>
<td>3.1</td>
</tr>
<tr>
<td>Grampian</td>
<td>290</td>
<td>8.6</td>
</tr>
<tr>
<td>Greater Glasgow &amp; Clyde</td>
<td>1,378</td>
<td>41.1</td>
</tr>
<tr>
<td>Highland</td>
<td>78</td>
<td>2.3</td>
</tr>
<tr>
<td>Lanarkshire</td>
<td>110</td>
<td>3.3</td>
</tr>
<tr>
<td>Lothian</td>
<td>856</td>
<td>25.5</td>
</tr>
<tr>
<td>Orkney</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Shetland</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Tayside</td>
<td>216</td>
<td>6.4</td>
</tr>
<tr>
<td>Western Isles</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,354</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

¹. Data provided via NaSH for 11 mainland boards. At time of publication, no data were available for three island boards.

**Gender and Sexual Behaviour of PrEP Recipients**

Of the 3,354 individuals prescribed PrEP at least once between 1 July 2017 and 30 June 2019, almost all were male (99%, 3,317) and, of those remaining, 26 were female and a further 11 identified as other or their gender was not recorded (Table 1). In addition, 17 (0.5%) of the 3,354 recorded PrEP recipients self-identified as being trans men or trans women. Of the 3,317 PrEP recipients who identified as male, 98% (3,266) were MSM, of whom more than three quarters (77%, 2,525) reported the gender of lifetime sexual partners as ‘men only’ and the remaining one quarter (23%, 741) reported the gender of lifetime sexual partners as ‘men and women’ (Table 2).
Table 2: Number and proportion of individuals prescribed PrEP for the first time by gender and gender of sexual partners, Scotland, 1 July 2017 to 30 June 2019.¹

<table>
<thead>
<tr>
<th>Gender</th>
<th>Gender of Sexual Partners</th>
<th>Number of Individuals</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>Men and women</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td></td>
<td>Men only</td>
<td>17</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Unknown</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Male</td>
<td>Men and women</td>
<td>741</td>
<td>22.1</td>
</tr>
<tr>
<td></td>
<td>Men only</td>
<td>2,525</td>
<td>75.3</td>
</tr>
<tr>
<td></td>
<td>Women only</td>
<td>17</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>Unknown</td>
<td>34</td>
<td>1.0</td>
</tr>
<tr>
<td>Unknown/other</td>
<td></td>
<td>11</td>
<td>0.3</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>3,354</td>
<td>100</td>
</tr>
</tbody>
</table>

¹ Note: gender of sexual partners relates to an individual’s reported sexual history over their lifetime.

Age of PrEP Recipients

Between 1 July 2017 and 30 June 2019, the largest proportion of the 3,354 PrEP recipients recorded were aged 20-29 years (41%, 1,370) at the time of their first PrEP prescription, with a small proportion (4%, 123) aged less than 20 years (Figure 2). Over one quarter of PrEP recipients (28%, 929) were aged 50 years and over when first starting PrEP. This is comparable with the age distribution reported after the first year of the programme.⁴

Figure 2: Number of individuals prescribed PrEP by age group (at time of first prescription), Scotland, 1 July 2017 to 30 June 2019.
Ethnicity/Nationality of PrEP Recipients

An extensive list of ethnic groupings and nationalities is available via NaSH. As a consequence, it has been necessary to collapse some groupings to facilitate analysis.

The majority of those prescribed PrEP during the first two years of the programme reported being of White Scottish ethnicity/Scottish nationality (55%, 1,838/3,354) with a further 12% self-identifying as English, Welsh, Northern Irish or British (Table 3). Smaller proportions of individuals from Poland, Ireland, China, Pakistan, India, Africa, and those from other/mixed ethnic groups were also recorded as having been prescribed PrEP on at least one occasion. It should be noted that for 533 (16%) PrEP recipients information on ethnicity/nationality was not available.

Table 3: Ethnicity of individuals prescribed PrEP, Scotland, 1 July 2017 to 30 June 2019.

<table>
<thead>
<tr>
<th>Ethnicity/nationality</th>
<th>Number of Individuals</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>White Scottish/ Scottish</td>
<td>1,838</td>
<td>54.8</td>
</tr>
<tr>
<td>British/English/Welsh/Northern Irish</td>
<td>403</td>
<td>12.1</td>
</tr>
<tr>
<td>White/other white ethnic group</td>
<td>295</td>
<td>8.8</td>
</tr>
<tr>
<td>Polish</td>
<td>52</td>
<td>1.6</td>
</tr>
<tr>
<td>Irish</td>
<td>41</td>
<td>1.2</td>
</tr>
<tr>
<td>Chinese/Chinese Scottish</td>
<td>32</td>
<td>1.0</td>
</tr>
<tr>
<td>Pakistani/Pakistani Scottish</td>
<td>25</td>
<td>0.7</td>
</tr>
<tr>
<td>Indian/Indian Scottish</td>
<td>21</td>
<td>0.6</td>
</tr>
<tr>
<td>African/African Scottish</td>
<td>14</td>
<td>0.4</td>
</tr>
<tr>
<td>Mixed/multiple ethnic group</td>
<td>41</td>
<td>1.2</td>
</tr>
<tr>
<td>Other ethnicities</td>
<td>59</td>
<td>1.8</td>
</tr>
<tr>
<td>Unknown</td>
<td>533</td>
<td>15.9</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,354</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Eligibility Reasons Among PrEP Recipients

Of the 3,354 individuals who initiated PrEP between 1 July 2017 and 30 June 2019, at least one valid PrEP-related eligibility code was recorded on NaSH for 3,108 (92.7%) of them within 28 days of a PrEP prescription. Where no eligibility code was recorded for a PrEP prescription within 28 days of its issue, it was categorised as invalid/no eligibility code.

For some of the 3,108 PrEP recipients for whom eligibility codes were available, more than one eligibility code was recorded (either multiple codes for one prescription or single codes for multiple prescriptions) resulting in a total of 3,587 codes.

Based on the 3,587 valid eligibility codes recorded, over three quarters (77.4%, 2,776) were associated with the individuals’ reported sexual behaviour (i.e. condomless penetrative anal
intercourse with two or more partners in the last 12 months and a likely risk of doing so in the next three months). One fifth of codes (19.7%, 706) referred to a documented bacterial rectal sexually transmitted infection (STI) in the last 12 months. By comparison, smaller proportions were associated with the PrEP recipient having an HIV positive partner with a detectable viral load or an equivalent high risk of HIV acquisition as agreed by the treating clinician (1.6% (59) and 1.3% (46) of codes recorded, respectively).

**Figure 3: Eligibility codes recorded for individuals prescribed PrEP, Scotland, 1 July 2017 to 30 June 2019.**

1. An individual can have more than one code recorded for each prescription received or different codes recorded for multiple prescriptions.
2. Where no eligibility code is recorded for a PrEP prescription within 28 days of its issue, it is categorised as invalid/no eligibility code.

**PrEP Regimen**

Prescription frequency data indicate that, of the 3,354 PrEP recipients recorded between 1 July 2017 and 30 June 2019, over half (57%, 1,928) chose a daily regimen, 17% (573) chose event-based dosing while the remaining quarter (25%, 853) used a combination of daily PrEP and event-based dosing.

**PrEP Recipients’ Service Attendance History**

Of the 3,354 PrEP recipients recorded, more than one third (39%, 1,318) had no sexual health service attendance recorded in the two years prior to the roll-out of the PrEP programme. One quarter (27%, 910) of all PrEP recipients had no attendance recorded at any time prior to initiation of the programme, indicating that a proportion of non-attending
individuals at high risk of sexual acquisition of HIV have engaged with services since its implementation.

**Individuals ineligible for PrEP/declined the offer of PrEP**

During the first two years of the programme, a total of 481 individuals who discussed PrEP with their clinician were considered ineligible at that time. A further 231 individuals were offered PrEP, but declined; of these, 60% (138) reported CAI with two or more partners in the last 12 months with the likely risk of doing so in the next three months and one fifth (22%, 50) were offered PrEP based on a documented bacterial STI in the last 12 months.

**Discussion**

By the end of the second year of Scotland’s PrEP programme, more than 3,300 individuals have been prescribed NHS-funded PrEP on one or more occasion. The majority of these individuals are MSM who have been deemed eligible for PrEP based on their self-reported history of condomless penetrative anal intercourse with two or more partners and more than half have chosen a daily PrEP regimen.

PrEP has encouraged individuals not previously engaged with sexual health services to come forward; by the end of the second year, almost 1,000 individuals who had no history of attending sexual health services were engaged with the PrEP programme.

Given the focus of sexual health education and awareness raising on MSM, the programme has been successful in reaching a large number of men in this group; however, PrEP is an intervention which can benefit all at high risk of HIV acquisition. Led by the national PrEP coordination group, work is ongoing to improve PrEP awareness among women, trans men, trans women, non-binary people, heterosexual men and people who inject drugs with concomitant sexual risk.

An evaluation of the impact of the PrEP programme on HIV and STI diagnoses to the end of the second year is currently being prepared for peer-review publication while a further paper, outlining a UK-wide agreed PrEP minimum dataset, is in progress.
References


Acknowledgments

The following individuals are acknowledged for their contribution to the preparation of this report: Beth Cullen, Duncan McMaster, Stuart Wrigglesworth, Alan Yeung, Megan Glancy, Ross Cameron, and Lesley Wallace of Health Protection Scotland/Information Services Division and Claudia Estcourt, Rak Nandwani and David Goldberg on behalf of the PrEP National Coordination Group.
Human Immunodeficiency Virus (HIV)

Human Immunodeficiency virus (HIV) is a virus which attacks the immune system. HIV is found in the body fluids of an untreated infected person. This includes semen, vaginal and anal fluids, blood and breast milk. HIV can be transmitted through condomless vaginal and anal sex, sharing needles, syringes or other injecting equipment and transmission from mother to baby during pregnancy, birth or breastfeeding. Untreated HIV infection progresses to advanced HIV disease or acquired immune deficiency syndrome (AIDS) which is defined by a number of clinical conditions. HIV is a chronic, lifelong infection and when managed successfully by antiretroviral therapy (ART) individuals can live a near normal life and cannot transmit the virus.

HIV pre-exposure prophylaxis (PrEP)

HIV pre-exposure prophylaxis is a novel prophylactic biomedical intervention which comprises of two HIV antiretroviral drugs which has been shown to reduce significantly the risk of sexual HIV acquisition among those at risk, particularly among men who have sex with men.

Men who have sex with men

Men who report having male sexual partners. Abbreviated to MSM.

People who inject drugs

People with a history of injecting drug use. Abbreviated to PWID.

List of Tables

<table>
<thead>
<tr>
<th>File name</th>
<th>File and size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure 1: Number of i) prescriptions and ii) individuals prescribed PrEP for first time, Scotland, 1 July 2017 to 30 June 2019.</td>
<td>Excel 13.1 kb</td>
</tr>
<tr>
<td>Table 1: Number and proportion of individuals prescribed PrEP by NHS board of clinic, Scotland, 1 July 2017 to 30 June 2019.</td>
<td>Excel 13.1 kb</td>
</tr>
<tr>
<td>Table 2: Number and proportion of individuals prescribed PrEP by gender and gender of sexual partners, Scotland, 1 July 2017 to 30 June 2019.</td>
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</tr>
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</tr>
<tr>
<td>Table 3: Ethnicity of PrEP recipients, Scotland, 1 July 2017 to 30 June 2019.</td>
<td>Excel 13.1 kb</td>
</tr>
<tr>
<td>Figure 3: Eligibility reasons among PrEP recipients, Scotland, 1 July 2017 to 30 June 2019.</td>
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</tbody>
</table>
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Further Information

Further Information can be found on the HPS website.
For more information on HIV see the HIV section of our website. For related topics, please see the Sexually Transmitted Infection pages.

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Appendices

Appendix 1 – Eligibility criteria for the prescribing of NHS-funded PrEP in Scotland

<table>
<thead>
<tr>
<th>HIV PrEP – UNIVERSAL CRITERIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>An individual who is:</td>
</tr>
<tr>
<td>• Aged 16 or over,</td>
</tr>
<tr>
<td>• HIV negative,</td>
</tr>
<tr>
<td>• Able to attend the clinic for regular 3 monthly review, including for monitoring, sexual health care and support and to collect prescriptions,</td>
</tr>
<tr>
<td>• Willing to stop NHS funded PrEP if the eligibility criteria no longer applies, and</td>
</tr>
<tr>
<td>• Resident in Scotland</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RISK BEHAVIOUR ELIGIBILITY CRITERIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>An individual who is:</td>
</tr>
</tbody>
</table>
| • A current sexual health partner, irrespective of gender, of people who are HIV positive and have a detectable viral load

OR

• An MSM or transgender women with a documented bacterial rectal STI in the last 12 months

OR

• An MSM or transgender women reporting condomless penetrative anal sex with two or more partners in the last 12 months, and likely to do so again in the next three months

OR

• Irrespective of gender, an equivalent high risk of HIV acquisition, as agreed with another specialist clinician

<table>
<thead>
<tr>
<th>HIV PrEP – NOT ELIGIBLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>An individual who is:</td>
</tr>
<tr>
<td>• Already HIV positive or suspected to be seroconverting to HIV,</td>
</tr>
<tr>
<td>• The HIV negative sexual partner of an HIV positive person who is on treatment and has undetectable viral load,</td>
</tr>
<tr>
<td>• Experiencing pre-existing medical conditions (such as renal impairment) that significantly increase the risk of TDX/FTC adverse events.</td>
</tr>
<tr>
<td>• Chronically infected with hepatitis B virus where TDF/FTC may be being used for therapy.</td>
</tr>
</tbody>
</table>
Appendix 2 – Early access details

Pre-Release Access
Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", HPS is obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access.

Standard Pre-Release Access:
Scottish Government Health Department
NHS Board Chief Executives
NHS Board Communication Leads
Chairs of the following Scottish Health Protection Network Sexual Health and Blood Borne Virus Groups:
PrEP National Coordination Group
PrEP Education and Awareness Group
Strategic Leads Group
HIV Clinical Leads Group
Sexual and Reproductive Health Lead Clinicians Group
Sexual Health Promotion Specialists Group
Blood Borne Virus Coordinators Group

Early Access for Management Information
These statistics will also have been made available to those who needed access to ‘management information’, ie as part of the delivery of health and care:

Early Access for Quality Assurance
These statistics will also have been made available to those who needed access to help quality assure the publication
Appendix 3 – HPS and Official Statistics

About HPS

HPS is a division of NHS National Services Scotland which works at the very heart of the health service across Scotland, delivering services critical to frontline patient care and supporting the efficient and effective operation of NHS Scotland.

HPS was established by the Scottish Government in 2005 to strengthen and coordinate health protection in Scotland. It is organised into three specialist groups with expertise provided by a multi-disciplinary workforce which includes doctors, nurses, scientists and information staff, all of whom are supported by core business and IM&T teams. The specialist groups are:

- Healthcare Associated Infections and Infection Control;
- Blood Borne Viruses and Sexually Transmitted Infections, Immunisation, and Respiratory and Vaccine Preventable Diseases;
- Gastrointestinal and Zoonoses Travel, and Environmental Public Health.

Official Statistics

Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within NHS National Services Scotland.

Our statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on NHS National Services Scotland’s statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the ISD website.