**National Chlamydia Screening Programme**

**Briefing Paper to Buckinghamshire Sexual Health Network**

**December 2021**

**Background:**

The National Chlamydia Screening Programme (NCSP) was rolled out across England between 2003 and 2008. In 2018, an External Peer Review Group, commissioned by Public Health England (PHE), considered scientific evidence for the NCSP and made a number of recommendations for a revised NCSP policy. The review found no consistent evidence that screening both men and women had measurably reduced the prevalence of chlamydia infection in the population.

The review therefore recommended that the opportunistic screening (that is the proactive offer of a chlamydia test to young people without symptoms) of women should continue because the detection and treatment of chlamydia can reduce the risk of pelvic inflammatory disease (PID) in women which can result in infertility and ectopic pregnancies, but the opportunistic screening of men should be removed from the NCSP and chlamydia tests should only be offered to men if they are identified partners of people with chlamydia, are symptomatic, are undergoing other sexual health screening, or if they request a test.

PHE consulted on the recommended changes during 2019 and 2020 and announced the outcome in June 2021 with implementation timescales for Local Authority areas to determine locally. Further information can be found on the NCSP web pages: <https://www.gov.uk/government/collections/national-chlamydia-screening-programme-ncsp>

Changes to the NCSP to be implemented in Buckinghamshire:

Updated NCSP guidance, standards and targets are expected from PHE but in the meantime Buckinghamshire Council and providers have reviewed local arrangements for opportunistic chlamydia screening and a local chlamydia care pathway has been developed (Appendix A).

In accordance with the national changes to the NCSP, opportunistic chlamydia screening in Buckinghamshire will focus on women\* where harm to reproductive health is greatest, combined with:

* Reducing time to test results and treatment
* Strengthening partner notification
* Re-testing after treatment

In practice this means that chlamydia screening in community settings, such as GP surgeries and community pharmacies, will only be proactively offered to young women. Services provided by sexual health services remain unchanged.

Everyone in Buckinghamshire can still get tested if they need, but men will not be proactively offered a test outside of sexual health services unless an indication has been identified, such as being a partner of someone with chlamydia or having symptoms.

Opportunistic screening for chlamydia in the community settings should be offered to asymptomatic young women on change of sexual partner (or annual if no change) **AND** at all contraceptive appointments. Contraceptive appointments can be used to educate that untreated chlamydia infections may result in reproductive harm and to highlight the importance of rapid diagnosis and treatment.

It remains vital that everyone who is diagnosed with chlamydia should be treated as early as possible, and it is proposed nationally that the NCSP standard between test and treatment time is shortened to 3 weeks (from the current 6 weeks) to align with British Association for Sexual Health and HIV (BASHH) standards for the management of sexually transmitted infections (STI).

Anyone whose partner has been diagnosed with chlamydia, or who has symptoms of chlamydia infection, should have a chlamydia test and those diagnosed with chlamydia should be supported to notify their sexual partner(s) so that the partner can also be tested and offered treatment. It is recommended that people should be re-tested after treatment to help prevent re-infection.

NCSP is one part of the broader sexual and reproductive health offer for young people and general sexual health recommendations remain unchanged:

* Specialist sexual health services (including online) offer STI testing and treatment for people of all ages;
* People of all ages who are concerned about chlamydia should seek the advice of a health professional and a test if required;
* People should practice safer sex including the use of condoms to protect themselves and their partners from contracting or transmitting infections;
* Services should continue to promote good sexual health and wellbeing.

*\*References to women throughout this document includes cisgender women, transgender men and n*on-binary (assigned female at birth) people who have not had hysterectomy or bilateral oophorectomy.