



Peer-To-Peer Learning – Routine Testing

Presenters: Fidel Contreras & Dr. James Tesorerio Thursday 5 November 2015

Routine HIV Testing in NYS

James M. Tesoriero, Ph.D.
Director, Division of HIV/STD/HCV Prevention
NYS Department of Health AIDS Institute



Ending the Epidemic In NYS: 3-Point Program

- 1. Identify persons with HIV who remain undiagnosed and link them to care.
- 2. Link and retain those with HIV in health care, to treat them with anti-HIV therapy to maximize virus suppression so they remain healthy and prevent further transmission.
- 3. Provide Pre-Exposure Prophylaxis (PrEP) for high risk persons to keep them HIV negative.

Diagnosis Gap:

154,000 estimated HIV infected persons 132,000 persons diagnosed with HIV 22,000 undiagnosed persons need to be diagnosed and linked to care.



HIV Testing

Targeted (Risk-Based) HIV Testing

Routine HIV Testing Based on PHL



NYS Public Health Law – Requires Routine HIV Test Offer in HealthCare Settings

- NYSPHL requires Health Care Providers to offer HIV testing to all persons aged 13-64 (and those outside this age range when risk is identified)
- Law applies to hospitals, diagnostic and treatment centers, primary care providers (physicians, NPs, PAs, midwives), family medicine, internal medicine, general practice, OB/GYN, and pediatric providers.
- HIV positive persons must be post test counseled and linked to HIV medical care by those testing.



Ending the Epidemic: The Investment

Additional \$10 Million towards Ending the Epidemic services and expenses in the 2015-2016 Budget

Article VII 2014 - 2015 Amendments

- Elimination of written consent for HIV testing.
- Expand data sharing between state and local health departments and health care providers for linkage and retention efforts.
- Implementation of a "30% rent cap" affordable housing protection.

Article VII 2015 - 2016 Amendments

- Elimination of written consent for HIV testing in correctional facilities.
- Limiting the admission of condoms in criminal proceedings for misdemeanor prostitution offenses.
- Addressing the legality of syringes obtained through syringe exchange programs.



HIV Test Policy and Hospital Review - 2014

- During 2014, the NYDSOH contracted with IRPO (a national organization providing a full spectrum of healthcare assessment and improvement services) to determine how well providers are responding NYSPHL regarding HIV testing.
- 2 phase project: 1) A review of hospital policies and procedures regarding HIV testing for all hospitals with Emergency Departments in NYS (N=192); and 2) a review of 200 patient charts from a representative sample of 27 emergency departments across all of NYS (including NYC) in 2013.

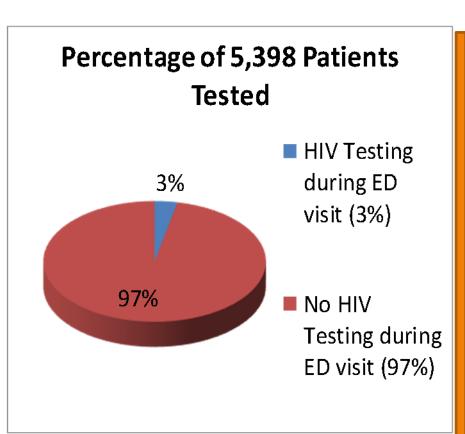


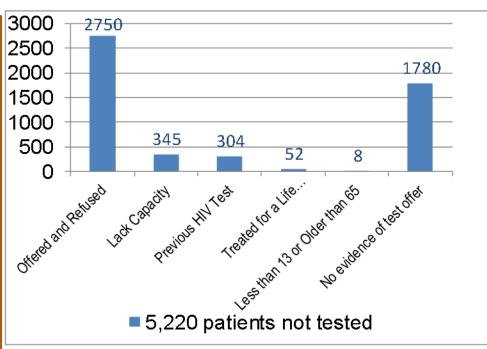
HIV Test Policy Findings

- IPRO's initial review revealed that 101 (53%) of hospitals had policies and procedures that were consistent with recently revised NYS Public Health Law (PHL) promoting routine HIV testing in healthcare settings.
- IPRO then worked with each hospital not meeting current PHL standards to outline required revisions and submit revised testing policies.
 - By May 14, 2015, policies from all 192 hospitals were received, reviewed and approved.



HIV Test Findings







Hospital Review Conclusions and Next Steps

- Low performance of HIV testing documented in EDs reviewed; however, the review period (2013)was prior to Launch of Ending the Epidemic Initiative.
- Expand review using 2014/2015
 Emergency Department visits to evaluate implementation of HIV testing policies and efforts to increase acceptance of HIV testing.



More Information About Ending the HIV Epidemic in NYS, including HIV Testing

Ending the Epidemic Website:

- http://www.health.ny.gov/diseases/aids/ending_the_epid emic/
- James.Tesoriero@health.ny.gov





Routine HIV Testing, or Routine HIV Screening, is the practice of making regular HIV testing a routine part of medical care.



Providers Complaints





- Follows the Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings.
- HIV testing is a part of routine medical care for people ages 13 and older.
- With a large experience in POC(rapid testing) it was less difficult to implement the HIV routine test center wide.
- We offer HIV tests along with other tests as part of a comprehensive medical care.
- General consent for medical care is considered sufficient consent and reduces stigma around HIV Testing.
- 4th Generation immunoassay is used to test patients.
- Information about the 4th Generation HIV test was provided to all the Providers at BHC.
- Protocols for HIV routine test are in place.



- We promote the HIV test in all points of care by advertising it center wide.
- We have posters and videos in the waiting areas encouraging patients to get tested.
- We do monthly events in the Center promoting HIV testing and educating people about HIV and prevention.
- Because we keep the conversation going, it makes patient more likely to get tested and making routine testing an integration of services —less stigmatizing.
- HIV test is added to general labs unless patient refuses.
- Patients do not feel targeted because is offered to everyone creating less stigma.



 At the moment of contact with the nurse, medical assistant and medical provider, we conduct motivational interviewing with the patient encouraging the patients to get tested for HIV.

All types of visits present an opportunity for testing; four newly identified HIV positive patients have being receiving care for years in BHC.

- -Two of them were identified with symptoms of HIV infection.
- -One died after diagnosis.
- If a client refuses, he/she is asked again at each subsequent visit



EHR & Routine Test

EHR reminders and Structure data track patients who belong in the following categories: getting tested by age, the last time they were tested, or never tested.

- If the patient falls within any of the above stated categories, the HIV test is offered. Patient refusal for HIV testing is captured within structure data fields and reasons are documented.
- It is important to notice the fact that when the provider offer the HIV testing as
 an integration of screening tests, the patient is more likely to accept to get
 tested.



HIV Routine Testing For All

- HIV screening is offered for patients in all points of care
- Persons at high risk for HIV infection are screened for HIV at least annually.
- General consent for medical care is considered sufficient to encompass consent for HIV testing.



For pregnant women:

- Our general consent for medical care is considered sufficient to encompass consent for HIV testing.
- HIV screening is included in the routine panel of prenatal screening tests for all pregnant women.
- > After the patient is notified HIV testing is performed
- HIV test is performed again in the third trimester



Strategies for Success

- Strong management, Medical Director, and Leadership support it
- Immediate linkage to HIV care program for patients testing positive
- First-hand knowledge of impact of HIV/AIDS diagnosis late in course of disease
- Prior Experience with HIV testing as POC



From September 01,2014 to June 30, 2015 904 patients have been screened for HIV.

From 2014 to 06/2015 we found 25 newly diagnosis all of them were immediately linkage to care at BHC. Unfortunately one of them were identify too late and died.



Q&A and Discussion





Thank you for participating in this Webinar. We hope that you are able to find the information provided useful as you continue your P4C project. We ask that you take a few moments to complete the feedback survey you will receive in a message following this webinar.



HIV TAC TEAM

Thank you for participating in today's webinar

Please email if you have any question(s): P4CHIVTAC@mayatech.com