

Collaboration between medical and non-medical HIV testing settings under revised CDC guidance

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What does the CDC guidance say?

- All persons aged 13-64 should be routinely screened for HIV in healthcare settings, regardless of identified risk behavior.
- HIV test consent should be included within general consent for medical care and not maintained separately (opt-out design).
- Traditional HIV prevention counseling should not be required for HIV testing.
- All persons at high risk of HIV infection should be screened at least annually.

What makes up a medical setting?

- A medical setting or “health-care setting” is explained in the recommendations as “hospital emergency departments, urgent care clinics, inpatient services, substance abuse treatment clinics, public health clinics, community clinics, correctional health-care facilities, and primary care settings.”
- Essentially, people attend medical settings for health-related reasons other than HIV testing.

What about non-medical settings?

“Often...the population most at risk for HIV includes persons who are least likely to interact with the conventional health-care system. The need to maintain primary prevention activities, identify persons at high risk for HIV who could benefit from prevention services, and provide HIV testing for persons who are at high risk for HIV in nonclinical venues remains undiminished.”

San Francisco context

- In San Francisco, there is currently a medical system of HIV testing that operates independently of the Department of Public Health, AIDS Office.
- The AIDS Office oversees a Counseling, Testing, and Linkage Network of 19 agencies that operate according to California State Office of AIDS policies (designed for non-medical settings).
 - **Of the 19 sites in the network, 8 are medical settings.**

Potential conflicts

- We require signed written consent for HIV testing in our network
- We require 20 minutes of risk-reduction counseling with a state-certified counselor to accompany all HIV tests
- We require all test results to be given face-to-face in a private session, NOT over the phone and NOT “no news is good news.”

Ways to work together

- All people coming to medical sites in the network who are aged 13-64 can be screened for HIV regardless of identified risk, but they are still required to sign a separate written consent form.
- If medical sites in the network are unable to provide risk-reduction counseling to everyone they would like to screen, they can test outside of our network but we can continue to support them (through training, technical assistance, test kits, and funding) if a mutual agreement is reached.

Change is ahead!

San Francisco is now looking to modify our current Counseling, Testing, and Linkage network to incorporate different models of HIV testing.

- Some will receive funding or other substantial support in exchange for more extensive data collection and provision of risk-reduction counseling services.
- Some will receive other types of technical assistance or only limited funding, in exchange for minimal data collection and adherence to guidance for medical settings.

Conclusions

- Communication is key
- Compromise will be necessary on both sides
- This can't be "us" vs. "them"
- Ultimately, we all want the same goal – reduced number of people who have HIV and don't know it, and reduced spread of HIV infection.

Thank you!

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