An audit on accuracy of baseline investigations in newly diagnosed adult HIV-1 positive individuals

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Introduction
Accurate initial assessment of all new HIV patients is an important area of practice and patient care. The BHIVA 2016 monitoring guidelines provide a consensus regarding the standard assessment of HIV infection from the time of diagnosis. We noted anecdotally that not all baseline investigations were being recorded, potentially missing important aspects of patient care.

Aim
To assess the adherence of our HIV service to the 2016 British HIV Association (BHIVA) guidelines for the routine investigation of adult HIV-1-infected individuals in a cohort of newly registered patients.

Methodology
A retrospective case-note review of all newly registered patients during a three-month period. Electronic patient records were examined and data on 22 discrete investigations were gathered. The key areas for improvement found were in measuring and recording data on cardiovascular and fracture risk in eligible patients.

Results
Areas where the service performed well and 100% of patients received testing included: HIV viral load, CD4+ cell count, HIV drug resistance, HLA B5701 and Hepatitis B and C status. Areas where the service performed less well and <80% of patients received testing included: screening of sexual health, mental health and latent TB infection (LTBI) and cardiovascular and fracture risk assessment.

Conclusion & Recommendations
The key areas for improvement found were in measuring and recording data on cardiovascular and fracture risk in eligible patients.

Recommendations made included the following:

- Updated and accurate baseline investigation bundle.
- New electronic medical HIV assessment proforma which includes a link to the FRAX calculator and a prompt to test for LTBI.
- Increased number of BP machines and weighing scales in clinical areas to improve cardiovascular risk recording.
- Strict adherence to a four-appointment pathway for a new patient: HIV nurse, HIV health advisor, HIV doctor and HIV peer support to improve capture of key information, provision of relevant support and signposting of patients.

The new HIV diagnosis pathway in the service is currently being redesigned and the findings from this audit will inform the design.