

Training Resource Designed to Increase Frequency of HIV Testing in Non-GUM Settings Displays Promising Outcomes

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Background and objective

- Late diagnosis of human immunodeficiency virus (HIV) remains a challenge in the UK.¹
- National guidelines set out criteria for testing outside the genitourinary (GUM) setting.¹ Despite this, testing in non-GUM specialties remains low.²
- The original ‘THINK! Test for HIV’ training resource was developed to increase testing in non-GUM secondary care settings and has recently been adapted for use in primary care settings. Following a successful pilot scheme, the primary care resource has now been made available across the UK.

Methods

- Collaborative project included healthcare professionals and patients from the GUM and respiratory departments at St George's Healthcare NHS Trust and was sponsored by Bristol-Myers Squibb.
- Following the successful uptake of the secondary care training resource, a primary care version was developed.
- Both resources are targeted at clinicians at all levels. The resources were developed to enable GPs, HIV specialists and/or healthcare professionals to deliver training on HIV testing to other healthcare professionals in non-GUM settings.
- Hospital and GP-level plans are comprised of a training slide deck, posters suitable for patient areas and physician offices, specific role-play scenarios related to primary and secondary care, and a survey assessing the impact of the training. (Box 1)
- Training can be delivered in 45–60 minutes and is designed to integrate into departmental training time.
- The content is applicable to all geographical localities and key slides allow tailoring of the training deck to the trainer's requirements.
- Feedback was requested from healthcare professionals who had completed and/or led the THINK! Test for HIV training.

Box 1: Programme identity and materials

Primary care training resource:



Secondary care training resource:



- Training slides applicable for both primary and secondary care, designed for all levels of clinician
- Specific video case studies to aid patient testing in both the GP and hospital scenarios
- Patient testimonial footage
- Online survey
- Support materials appropriate for both GP surgeries and hospitals
- Summary sheet

Box 2: Testimonials

*“Since using these materials, there has been a **60% increase** in routine HIV testing by junior doctors and a **13% shift** in earlier diagnosis”*

Dr Dushyant Mital, Consultant in Sexual Health & HIV Medicine, Milton Keynes NHS Foundation Trust

*“I can certainly say there is increased awareness amongst students and doctors and there is a **lot more testing going on.**”*

Dr Mas Chaponda, Consultant HIV Physician, The Royal Liverpool and Broadgreen University Hospitals NHS Trust

“This resource has been a valuable tool in helping to normalise HIV testing, allowing clinicians to raise the issue of opportunistic HIV testing in non-sexual health settings locally. It's an ‘off-the-shelf, ready-to-go’ training tool that not only generated interest and discussion during training but helped identify barriers to testing, leading to practical changes and increased HIV testing in primary care”

Dr Mark Pakianathan, Consultant Physician Sexual Health/HIV & GUM Care Group Lead, St George's Healthcare NHS Trust

“I am sure this will greatly assist us all to train and influence other HCPs to promote HIV Testing in acute and primary care.”

Tim Wilde, Advanced Nurse Practitioner/Senior lecturer in HIV/AIDS

“We have used the Think! Test training kit in the early diagnosis of HIV project which has been running across the North East SHA. It has evaluated well in training and awareness sessions with GPs, practice nurses and colleagues in associated disciplines. Feedback from patients was positive on the waiting room poster and GPs especially valued the indicator conditions card.”

Sharon Robson, HIV Project Officer, North East Strategic Health Authority

Results

- The training resource supports clinicians in offering HIV testing to patients, and alerts them to their centre's care pathway.
- To date, 85 healthcare centres have requested the resource and the training pack has received positive feedback from several departments. (Box 2)
- The THINK! Test HIV training resource has been well accepted by clinicians who have both tested the pack and trained others to use it.
- There has been a 60% increase in routine HIV testing by junior doctors and a 13% shift in earlier diagnosis in a centre in Milton Keynes. (Box 2)
- On completion of training for a team in York, two seroconverters were identified in the first month alone.
- At the Royal London Hospital over 600 nurses and physicians (all grades) have been trained using the resource.

Conclusion

- Results show that delivery and rollout of the training resource has been well received.
- Outcomes from the training may include an increase in testing for HIV and earlier diagnosis for patients.

References

1. BHIVA. UK National Guidelines for HIV Testing. 2008
2. Health Protection Agency. HIV in the United Kingdom: 2011 Report



The resources are available for HCPs to download at <http://www.hivthinktest.co.uk>