



## Implementing and Tracking Progress Toward Routine HIV Testing in a Large Hospital Outpatient Department

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# Routine HIV Testing at Montefiore OPD

## Objectives

- Implement strategies to routinize HIV testing throughout OPD (CHCs & Other)
- Determine annual HIV testing rate & percent of patients ever tested in 23 CHCs

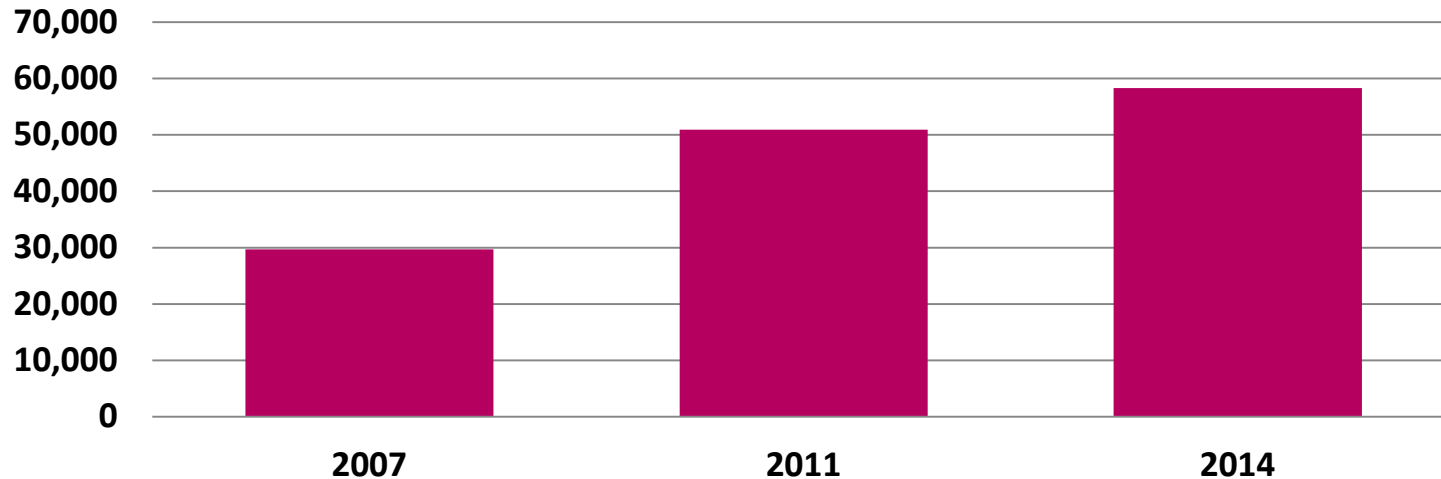
## Methods

- 2004: MMG launched ACTS in 10 CHCs with ongoing support and M&E
  - ACTS model for streamlined testing (Advise, Consent, Test, Support)
  - Practice change framework: Buy-in, Implementation Planning, Training & Mentoring, Monitoring & Evaluation
- 2010: NYS mandated offer of HIV testing (written/oral consent required)
- 2011: Support from Gilead FOCUS Program expanded scope to MMC-wide, added 4 Pillars (Integrated; EMR; Policy; Training & QI)
- 2014: NYS eliminated requirement for written consent

# Routine HIV Testing: Measuring Progress

## All OPD: Annual HIV Testing

All Patients, All Ages



## 23 CHCs: Ever HIV Tested

13-64 years old, Non-pregnant (n= 100k)



- Stable patient population
- Accounts for half of all OPD testing
- 10 of 23 sites early adopters via ACTS

## Conclusion

- Implementation of ACTS and Glied's FOCUS Program resulted in sustained increase in HIV testing throughout the outpatient department using existing staff

## Lessons Learned

- Streamlined, provider-delivered HIV testing is feasible
- Improvements to laws, policies & IT systems necessary but not sufficient
- Practice change can take more than a decade
- **To truly implement routine HIV testing (like HCV screening), advocacy is needed to remove consent requirements and other barriers**