

Expanding Routine HIV Testing in Healthcare Settings: Training of Clinicians by Ryan White AIDS Education and Training Centers (AETCs)

U.S. Department of Health and Human Services, Health Resources and Services Administration, HIV/AIDS Bureau, Rockville, MD, U.S., Lynn Wegman

OBJECTIVE

An estimated 21% of persons living with HIV/AIDS in the U.S. do not know their HIV status.¹ As such, they are not getting care for their HIV disease. Federal recommendations released in 2006 are a response to this problem in their call for expanded HIV testing in facilities likely to encounter undiagnosed persons. A Federal initiative is training clinicians in order to promote routine HIV testing. Training is national in scope but targets areas where African Americans and other disproportionately impacted populations reside, particularly 22 hard hit jurisdictions and such service sites as hospital emergency rooms and community health centers.

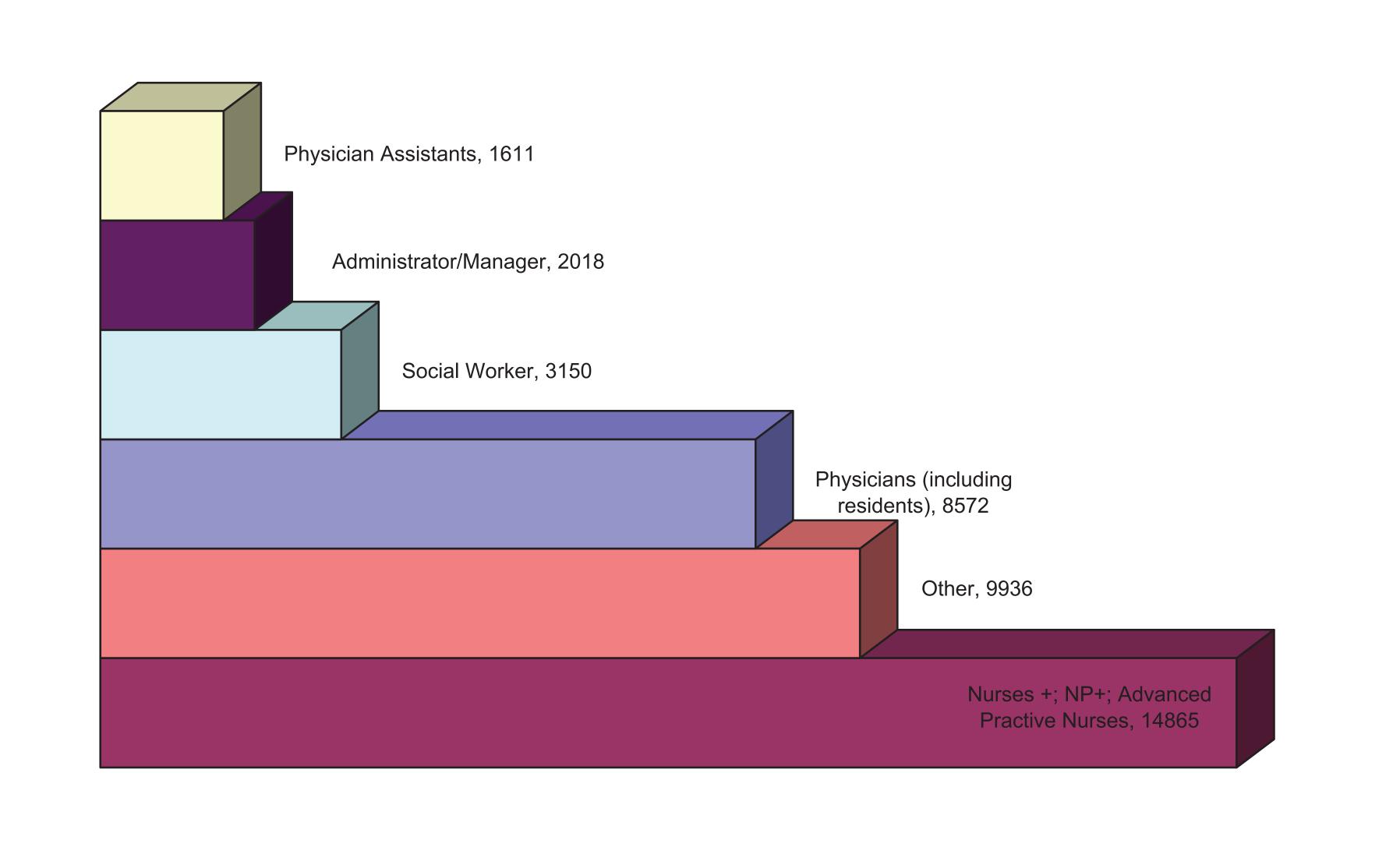
METHODS

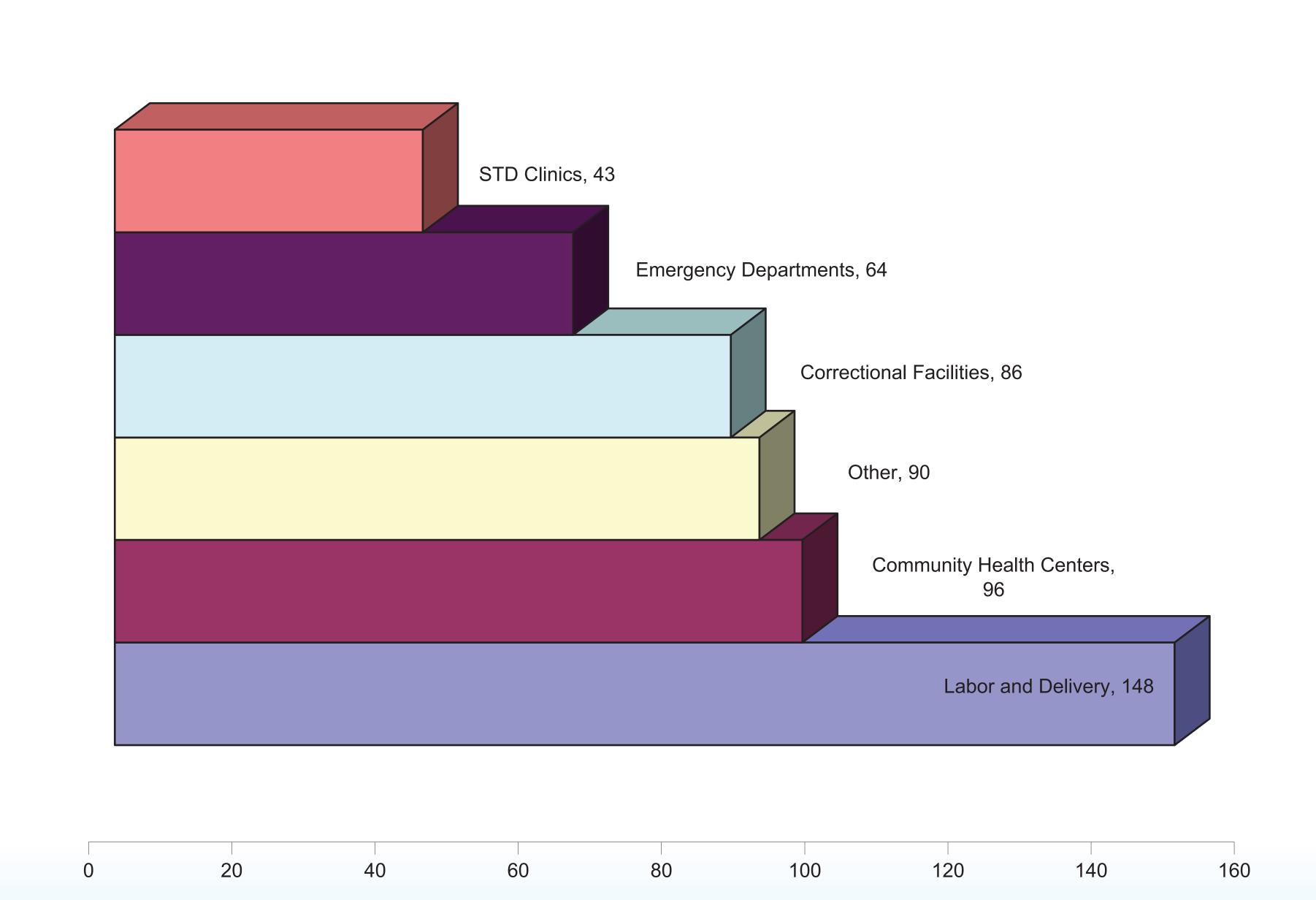
Funding was provided to AIDS Education and Training Centers (AETCs) in 2007 and 2008 in order to rapidly implement clinician training to encourage adoption of routine HIV testing in healthcare settings. AETCs were selected for this task given their 20+ year track record of conducting on-site and on-line clinician training and materials development via a network of 11 regional centers and 130 local sites across the nation. AETCs are the clinician training arm of the Ryan White HIV/AIDS Program, administered by the Health Resources and Services Administration (HRSA).

The Centers for Disease Control and Prevention (CDC) developed Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings, September 22, 2006, which include a call for increased routine HIV testing. CDC also provided funding of approximately \$3.5 million to enable AETCs to deliver tailored clinician training during 2007-2009.

- All AETCs work with partners and stakeholders targeted for increased routine testing—most often, state and local health departments, community clinics, hospital emergency rooms and labor/delivery departments, and other sites.
- AETCs use an array of training techniques and capacity building to accommodate various needs and health care settings in which testing occurs. Techniques include: training materials (e.g., curricula, brochures, and policies/protocols), on-site and distance-based learning, infrastructure tools (e.g., written policies, protocols).

STD Clinics- 4% (108) Emergency Departments- 6% (156) Labor & Delivery- 6% (151) Correctional Facilities- 9% (217) General Audience-17% (417) Community Health Centers- 18% (469) Other-40% (1004)





FINDINGS

Number of Trainings Conducted on New HIV Testing Recommendations, September 2006-June 2008

- 19% of training sites were community health clinics
- 17% of training targeted a general audience.
- 40% of training targeted "Other" sites (e.g., substance abuse center/clinics, community based organizations, and other settings).

Number of Trainees, By Type, September 2006-June 2008

- * 37% of trainees were from the nursing profession.
- * 21% of trainees were physicians.

Other (25%) of trainees includes dentists and other dental professionals, pharmacists, dieticians, health educators, mental health professional, public health professional, social worker, substance abuse professionals, agency board members, and case managers.

Number of Sites That Subsequently Implemented Routine Testing, September 2006-June 2008

- 40% of the sites that subsequently implemented HIV testing after the AETC training were hospitals (i.e., emergency departments, labor/delivery).
- 18% of the sites that subsequently implemented testing were community health centers.
- 17% of the sites that subsequently implemented testing included: substance abuse center/clinics, community based organizations, and other settings.

FEATURES OF TRAINING ACTIVITIES

Planning. AETCs work with State health departments and AIDS offices and other partners in determining where to target training (e.g., geographic areas, racial/ethnic populations), planning of educational forums, and modifying educational materials. AETCs also conduct assessments in some areas to determine what training needs to address.

Trainings/Interventions Developed. Various tools have been developed, such as:

- Web-based curricula (e.g., for labor and delivery units, emergency rooms).
- Methods for testing in special settings such as dental clinics.
- Testing protocols such as a streamlined process to conduct routine testing in 5 minutes.
- Topic-specific training. Examples include staff training on administering the test, delivery of test results, and staff education on linking HIV-infected clients to care.

National Resources Developed. The AETC network's tools and techniques are consolidated on a national Web site. Highlights include:

- Monitoring State HIV Testing Laws. An online State HIV Testing Laws Compendium developed by the AETC entity, National Clinicians' Consultation Center. The document helps raise awareness of requirements and fosters state-to-state collaboration on testing policies.
- HIV/AIDS Clinician Toolkit. This CD-ROM was updated to include new HIV testing resources.

All AETC resources on HIV testing and counseling can be obtained via the AETC National Resource Center at http://aidsetc.org

CONCLUSIONS

- Tailored Training Necessary. AETC experience shows that training needs must be tailored given that training sites vary (e.g., emergency rooms, community clinics), as do their training needs (e.g., implementing State-specific provisions on testing, optimal techniques for testing within populations such as pregnant women).
- Implementation Requires Stakeholder Involvement. Early involvement in the development of training is necessary so that training needs can be identified and sites can be consulted when planning training. Additionally, design and implementation of training is time-consuming and can take as little as one month to more than one and a half years.
- Evaluating the Readiness of Healthcare Settings to Implement Testing. A national evaluation of healthcare sites is being conducted by the AETCs to gather additional data on organization level changes which impact their ability to provide routine HIV testing.