



How to Implement Opt-Out HIV Testing in a Resource-Limited Residency Practice

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Introduction and Objectives

- The US Preventive Services Task Force (USPSTF) recommends screening all patients ages 15-65 for HIV at least once (Grade A Recommendation)
- Public health clinics are able to enforce opt-out HIV testing; however, this can be a challenging process in a private practice or residency clinic setting. Our clinic, specifically, is limited by staff numbers and time resources, as well as by the limited financial resources of our patients.
- Our goal was to implement an opt-out HIV screening workflow that could be implemented and sustained in our resource-limited clinical environment, while raising awareness of HIV and improving HIV screening rates in our clinic population

Results

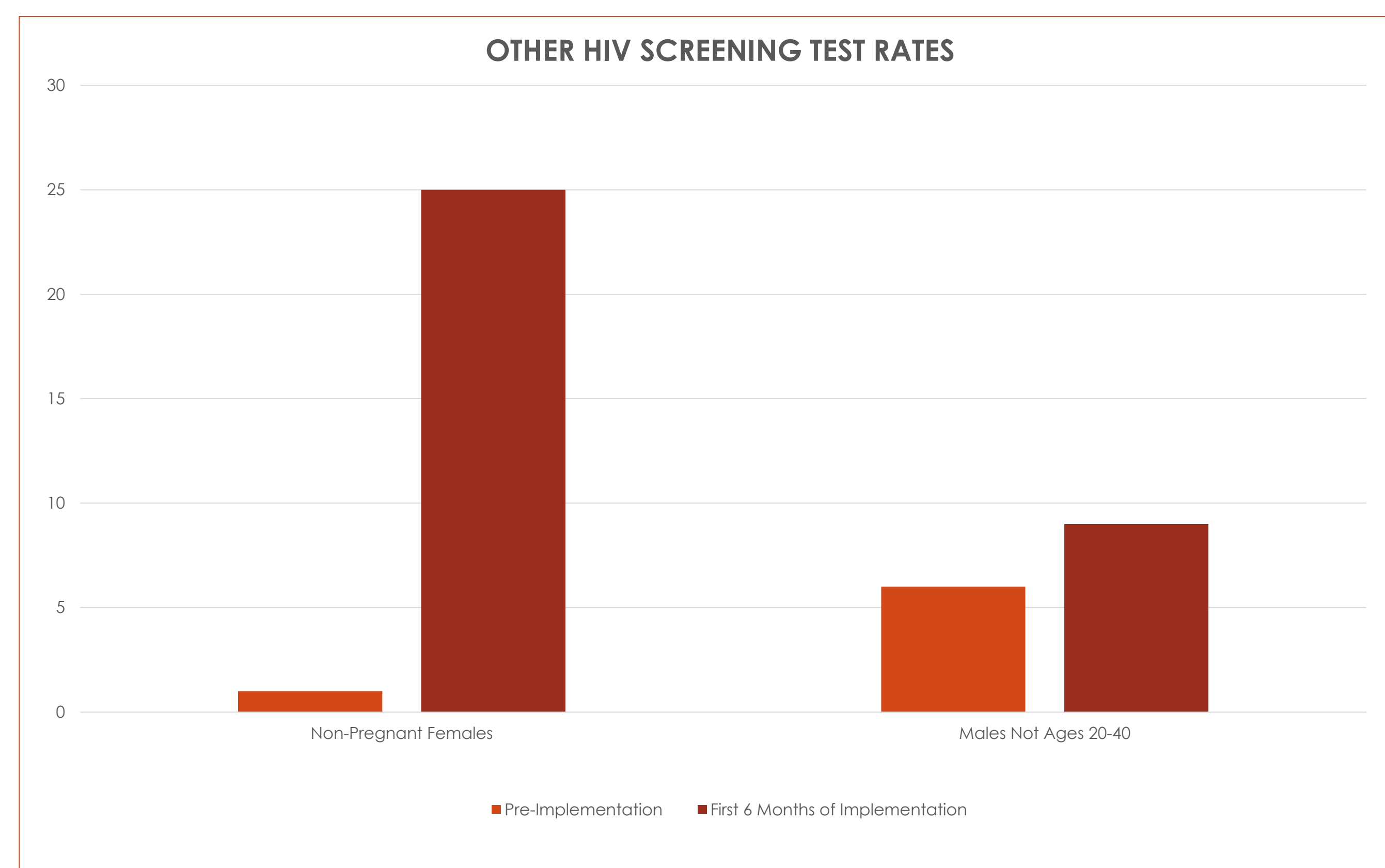
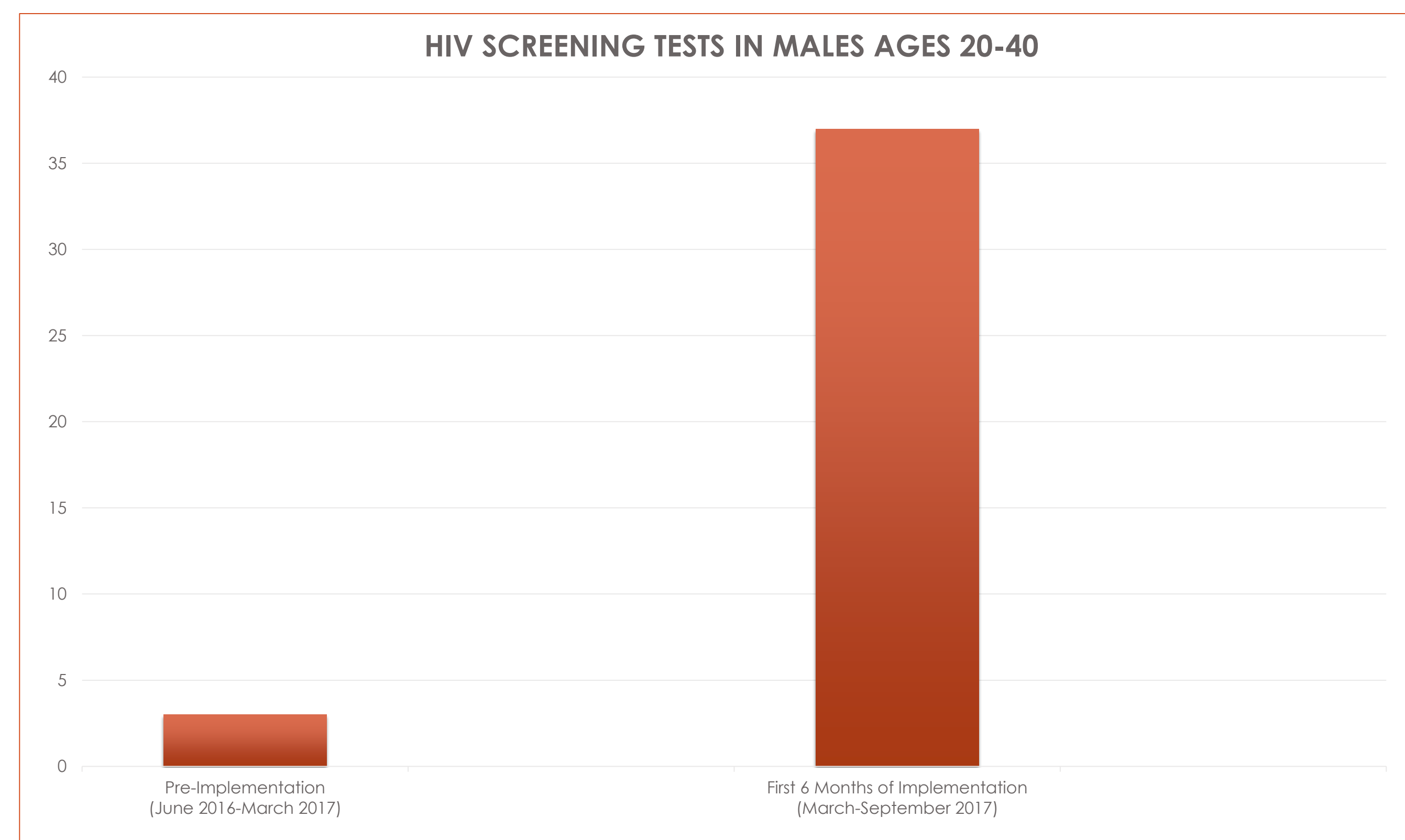
- During the year prior to implementation of opt-out HIV testing for males ages 20-40, three members of this target population had been screened
- In the six months since implementation, 37 members of the target population have been screened for HIV
- Overall, an increase in screening of HIV outside our target population has also been seen, with non-pregnant female screening increasing from 1 to 25 patients, and males outside ages 20-40 years increasing from 6 to 9

Discussion

- Provider and staff survey conducted three months after implementation revealed that:
- Staff departments involved in the workflow for opt-out HIV screening all felt that they could handle screening a larger target population
 - Ongoing education for staff, residents, and providers was needed to improve awareness of HIV screening recommendations, as well as HIV treatment and prognosis

Methods

- We partnered with our local county health department and the Wyoming AIDS Education Training Center (AETC) to combine resources to work towards meeting the USPSTF recommendation. These organizations:
 - Provide free point-of-care HIV screening tests
 - Manage the data entry
- To limit overwhelming workflow demands, we created an initial manageable, but high-risk, target population of males ages 20-40 to offer opt-out screening
- In order to not overwhelm any one department, the remaining workflow steps were divided among several different clinic departments including front desk, nursing, laboratory, and providers
- We coordinated implementation of our new workflow with World AIDS Day to provide patient, staff, resident, and provider awareness and education on HIV screening goals
- A staff survey and PDSA cycle were completed to help drive plans to expand our target screening population



Plan

- Increase range of opt-out target population for our clinic in increments until we meet goal screening population defined by the USPSTF
- Further education of staff, residents and providers
- Advocate for increased staffing resources to meet these screening guidelines, as well as others

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