

Annual Conference of the National HIV Nurses Association (NHIVNA)



'Innovative Practice' A commissioned service to deliver routine HIV screening within the Acute Medical Unit(AMU)

..Presented by:

Suzan Potts | HIV Clinical Nurse Specialist

Lancashire HIV Services





Acknowledgements

Co-Authors:

Shane Faulkner | HIV Clinical Care Coordinator

Dr Wafaa Wasef | Consultant in Genitourinary & HIV Medicine

We would also like to thank the below departments for their continued support and guidance in implementing this service.





Positive

Blackpool and Lancashire Sexual Health Services





Our Service Aims & Objectives



Y

 To integrate HIV testing into routine admission processes for all general medical patients

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• To achieve recommended national guidelines & local Trust objectives (PHE Nov 2017)

3

• To identify undiagnosed HIV infection, reduce late diagnosis & improve morbidity & mortality



• To prevent onward transmission

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Why test?



Blackpool – 'High Prevalence' Area.(Fingertips PHE 2019)

Missed opportunities in Primary Care setting

 Embedding HIV testing into AMU will support HIV as differential diagnosis & ensure screening becomes routine practice.



Tools required for



success

- Referral pathways & KPIs identified.
- Staff training & education sessions
- Patient information.
- On-going support from senior staff e.g. Consultants,
 Matrons, Ward Managers & Sexual Health Services.



Method



- Local policy developed "Screening for HIV in the Acute Medical Unit"
- Nurse-led initiative with opt-out screening protocol
- Established local key performance indicators
- In patient electronic patient tracker modified
- Robust pathways established to HIV services
- Audited & quality improvement





Inclusion Criteria

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General Medical Admission

All Ages

Not screened in the last 12 weeks

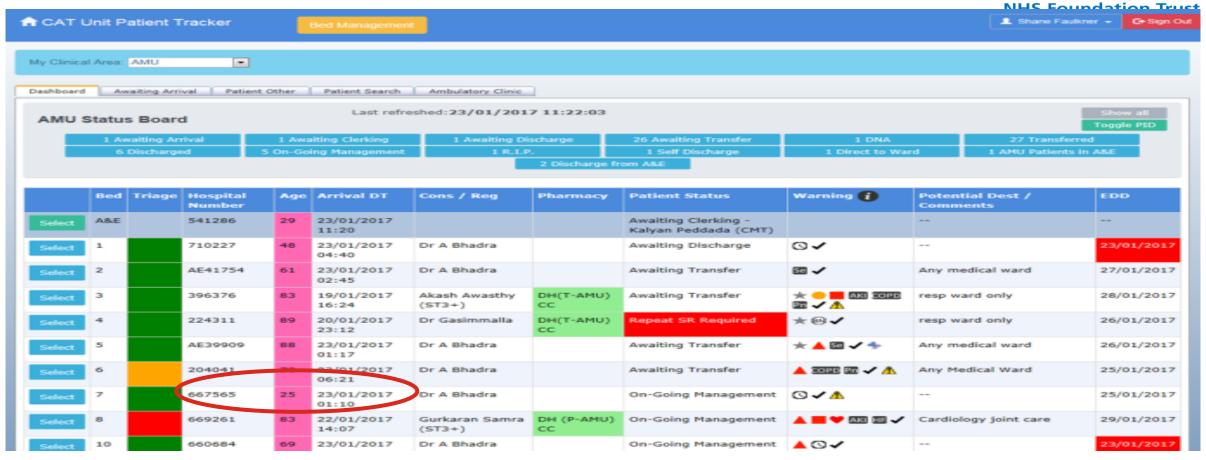
Excluding criteria: Unable to consent due to temporary/long term cognitive impairment, Mental Health issues, pre-existing HIV diagnosis.



Compassion

Patient Tracker





Demonstrates patients age highlighted (pink) when HIV screening incomplete

People Centred Positive Together we care Compassion Excellence

Patient Tracker

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CATL	Unit Pati	ent Tracker		Bed Management					▲ Shane Faulkn	er - C-Sign
Select	20	565118	86	13/01/2017 07:52	Dr Mazhar Alam	DH(T-AMU) CC	On-Going Management		keep for now.	27/01/201
Select	21	499591	58	22/01/2017 17:47	Dr Mazhar Alam		Awaiting Transfer	O - A	Any ward	25/01/201
elect	22	AB64788	85	22/01/2017 18:34	Dr Mazhar Alam		Awaiting Transfer	**	Any ward	27/01/201
Select	24	020059	58	22/01/2017 12:53	Dr Shatta	DH(T-AMU)	Repeat SR. Required	*024	Any medical ward	24/01/201
iefect	25	831490	70	22/01/2017 21:24	Dr Mazhar Alam		Awaiting Transfer		resp ward	26/01/201
ielect	26	790609	97	22/01/2017 05:30	Dr A Ashraf	DH (P-MED) CC	Repeat SR. Required	* • = 4 = 4	CCOP / Any	27/01/201
elect	27	814593	88	21/01/2017 01:27	Dr Mazhar Alam	DH(T-AMU)	Awaiting Transfer	**	-	25/01/201
efect	28	C05739	78	22/01/2017 01:51	Dr A Ashraf		Repeat SR. Required	★四章✓▲	Any / COOP	27/01/201
elect	29	AC32412	88	22/01/2017	Dr Pramanik	DH (P-AMU) CC	Awaiting Transfer	* A • B •	Stroke	27/01/201
elect	32	M0/407	8.5	21/01/2017	Dr Pramanik		On-Going Management	★國靈✓	Keep	27/01/201
ielect	33	831861	-	19/01/2017 09:00	Dr A Ashraf	DH(T-AMU)	Repeat SR Required		side room Any medical ward	27/01/201
infect	34	D06050	88	22/01/2017 08:23	Dr Pramanik		Awaiting Transfer	▲童✓▲		25/01/201
elect	35	193341	85	22/01/2017 14:18	Dr Pramanik		Awaiting Transfer	****		23/01/201
efect	36	206567	91	20/01/2017 15:46	Dr Pramanik	DH (P-MED) CC	Awaiting Transfer	* <u>A</u> 80 B	KEEP ON AMU UNTIL CARDIOLOGY REVIEW	26/01/201
elect	37	315080	88	22/01/2017 17:45	Dr Pramanik		Awaiting Transfer	★四✓	Resp ward only	26/01/201
elect	38	950707	46	23/01/2017 05:32	Dr Pramanik	DH (P-AMU)	Awaiting Transfer	01	any ward	25/01/201

Completed



Patient Tracker



Abdominal	AKI
#NOF	Pneumonia
	Comments:
Please - Please select - Completed Declined N/A	Comments: Barrier Nurse
- Please select - Completed Declined	

Shows the required data entry point as part of a patients admission process

Outcome: 10/13-09/16



- 24,012 patients identified for screening
- 4,816 (20%) excluded as per exclusion criteria.
- 19,196 (80%) eligible for testing.
- In total 9,664/19,196 (50.3%) tested.
- A total of 9,532/19,196 (49.7%) 'opted-out' of testing.

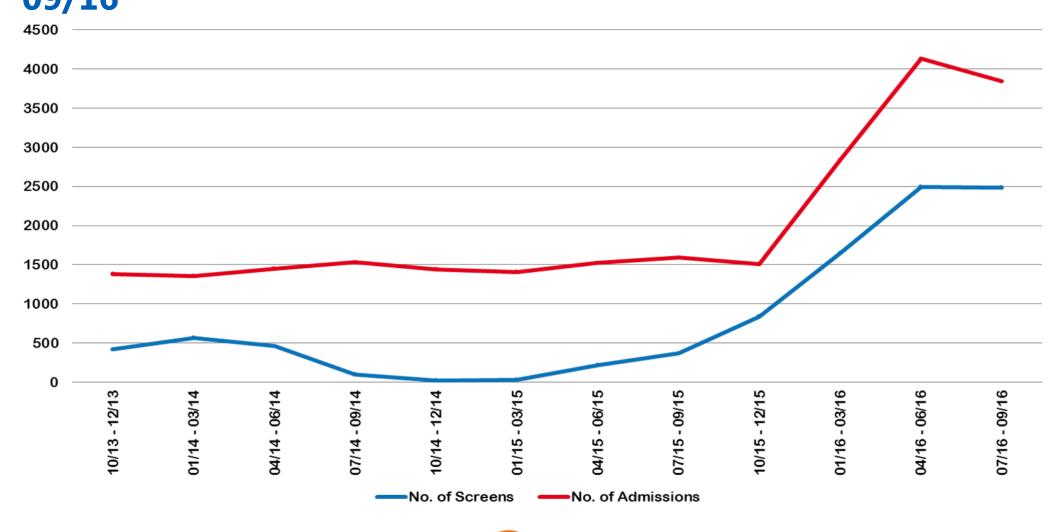


Graph 1: Number of tests taken in relation to the number of patients admitted between 10/13 and 09/16

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NHS Foundation Trust





Results: 10/13-09/16



• 12 HIV positive tests.

• 10/12 (83.3%) new diagnoses.

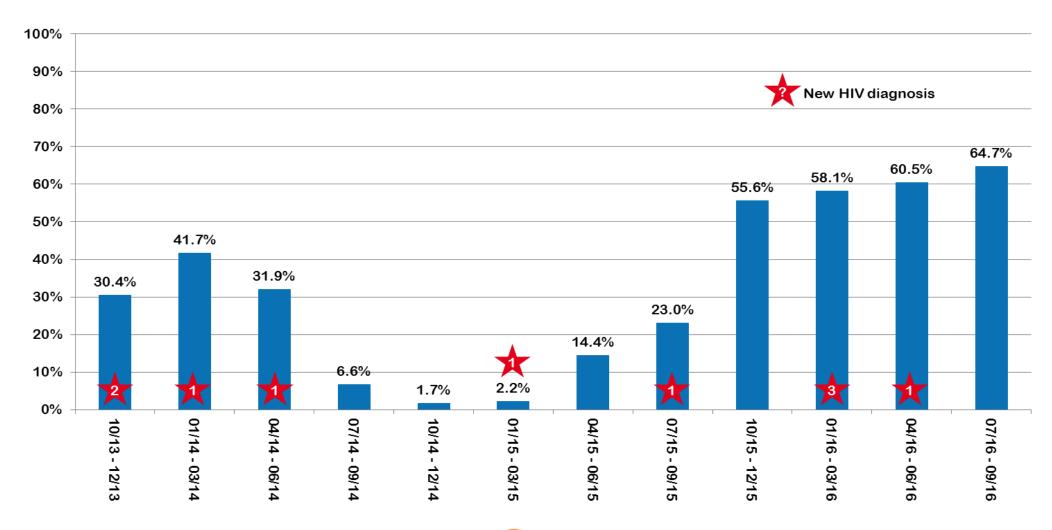
• 2/12 (16.7%) pre-existing diagnoses, re-engaged in care.



Graph 2: Uptake of HIV tests between 10/13 and 09/16 including new HIV diagnoses

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Update: Oct 13 – May 19



57,757 patients identified for screening

• 5,012 (9%) excluded as per exclusion criteria.

52,745 (91%) eligible for testing.

In total 15,850/52,745 (30%) tested.

A total of 36,895/52,745 (70%) were not tested.





Results:

• 26 HIV positive tests.

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• 17/26 (65%) new diagnoses.

• 9/26 (35%) pre-existing diagnoses





Conclusion

- Findings support AMU is a suitable environment for opportunistic & cost effective HIV testing.
- Supports early diagnosis and prevents missed opportunities.
- Engages late diagnoses into specialist services.
- Improves mortality.
- Existing patients who are "lost to follow up" re-engage in care.
- Perseverance & a consistent approach.

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Future roll out to other areas







- https://assets.publishing.service.gov.uk/government/uploads/system/uploads/at tachment data/file/675809/Towards elimination of HIV transmission AIDS and HIV related deaths in the UK.pdf
- https://fingertips.phe.org.uk/
- https://www.gov.uk/guidance/hiv-testing

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https://www.guidelines.co.uk/infection/nice-hiv-testing-guideline/252881.article

