

Improving HIV screening of TB patients in Santa Clara County

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Santa Clara County: HIV status of TB cases in 2008

	Public		Private		Total
	n	(%)	n	(%)	n
Total Known HIV Status	70	(77)	21	(23)	91 (46)
Negative	66	(77)	20	(23)	86
Positive	4	(80)	1	(20)	5
Total Unknown HIV Status	14	(13)	92	(87)	106 (54)
Refused	0	(0)	5	(100)	5
Not Offered	0	(0)	2	(100)	2
Test Done, Results Unknown	0	(0)	1	(100)	1
Test Offered, No Further Documentation	5	(22)	18	(78)	23
Unknown	9	(12)	65	(88)	74
Not Found	0	(0)	1	(100)	1
Grand Total	84	(43)	113	(57)	197

National target is 85%!

Barriers to getting HIV status

- MDs reluctant to get status on age extremes and populations perceived to be low risk
 - MD education re: HIV is routine part of TB care
- MDs reluctant to give us status b/c of confidentiality
 - New legislation allowing reporting of HIV status within public health system in CA
 - Confusion regarding the legislation to allow reporting of HIV status between health care providers for surveillance purposes
- Cost of HIV test
- Access to HIV test
 - Field testing HIV
- TB program confusion about HIV status and confidentiality

SCC approach for improving our HIV status indicator in cases

- TB clinic
 - Reminders to TB clinic MDs to get HIV status on pts
 - Agree to get HIV status on children
- Private providers
 - Educate MDs about importance of HIV status to make decisions related to treatment of TB
 - Track and request HIV status
 - If patient hospitalized HIV status would be requested as part of Gotch approval process
- Within our TB program
 - Education to PHNs, CDIs about importance of HIV status
 - Multiple layers of tracking HIV status
 - Reporting arm (CDIs)
 - Case management arm (PHNs)
 - Electronic medical record line listing coordinated with case conference

Example: Case Conference “nuts and bolts”

- New reporting form came on line this year
- Passage of bill now enables us to report HIV status on this report
- Both CDC and the state public health department will be using HIV status as an indicator of quality
- CDIs will be looking for evidence of HIV status - please scan in lab reports
- We will be looking for HIV status within six months of diagnosis

Ex: Approach to getting status on contacts to TB cases

- New York City has found that if index is HIV positive, contacts are very likely to also be HIV positive
- We will focus on getting HIV status on all contacts to HIV infected TB cases
- We will work with TB clinic re: their approach to HIV status in contacts
- Consider combining HIV/QFT testing for our draws

Programmatic infrastructure to support HIV testing

- Bimonthly case conferences
 - Line list of patients includes whether HIV status is known (like DOT, etc...)
 - Case managers include HIV status on Drug-o-gram so that CDIs can update RVCT
- Electronic public health record
 - HIV status included in initial patient interview - and if case manager records - will populate line list
- Provider education
 - Initial letter of introduction includes HIV status in the list of information we need to obtain along with culture conversion, cxr, etc..
 - Request HIV status if not yet known
 - TB clinic agreed to test all patients for HIV status

Incentives to get HIV status

- HIV status is a prerequisite to changes in DOT frequency (very effective for both providers and patients)
 - Daily -> Biweekly DOT
 - Daily -> DOT/SAT
- Have not used FSIE for HIV status

HIV status of TB cases, 2011

	n (%)
Total Known HIV Status	141 (78)
Negative	138 (76)
Positive	3 (2)
Total Unknown HIV Status	40 (22)
Unknown	35 (19)
Dead at diagnosis	3 (2)
Refused	1 (0.5)
Lost to follow-up	1 (0.5)

Challenges, next steps

- Implement systematic approach to reviewing reasons why TB patients did not get HIV tested, i.e. mini cohort review
- Providers flat out refuse to test
 - Private providers
 - Older MDs, generally not familiar with treatment of HIV
 - Reluctance to broach HIV testing because of discomfort of discussing with patient
- Patients occasionally refuse, but providers seem to be the more challenging group to educate
- Training of CDIs re: reporting HIV status to state
 - Helpful to get line list of HIV status

An Anecdote

- Through routine screening in private provider patients, HIV/AIDS case was a surprise
 - 55 yo Vietnamese man, married
 - Two children, school aged
- Fits the profile for what providers describe as "low risk"
- Family tested -
 - wife found to have HIV/AIDS
 - Children school aged both tested negative
- Both placed on ARVs

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