

ROUTINE SCREENING FOR HIV IN ED

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AIM

To increase routine screening for HIV in adult patients presenting to Epsom and St Helier Emergency Departments

BACKGROUND

NICE recommend universal HIV screening in high prevalence areas (>0.2%). Trust quidelines advise offering HIV tests to all patients over 16 presenting to the emergency department (ED). The local HIV prevalence is 0.25% and there is a high rate of late diagnosis. ED provides an opportunity to identify positive patients in at atrisk population. Late diagnosis leads to excess mortality, whilst unknown HIV status results in increased transmission risk.

METHODS

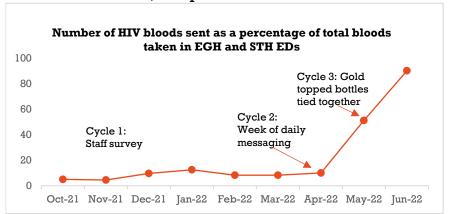
A PDSA cycle approach was adopted. Cycle 1 involved a survey identifying staff barriers to testing.

METHODS

The survey informed department-wide communications. Cycle 2 entailed a week of daily messaging at morning handover and the presence of an HIV champion in triage. Cycle 3 comprised of bundling blood test bottles together as a reminder to take the test. The number of HIV tests sent was measured between November 2021 and July 2022. Screening was introduced at Epsom in May 2022 and then included. The total number of bloods sent from ED was measured for patients aged over 16, excluding repeat attenders.

RESULTS

HIV screening of ED patients has improved across both sites. On average in June 2022, 90.1% of patients attending Epsom and St Helier EDs had an HIV test, compared to 4.5% in November 2021.



CONCLUSIONS/RECOMMENDATIONS

Repeated communications and interventions aimed at improving staff understanding and engagement improved routine screening for HIV in ED. The same process is now being used for Hepatitis B and C testing, with 5-10 positive results anticipated for the Trust per month, extending the positive benefits of blood born virus testing in ED.

