# Opportunistic HIV screening of new patients within high prevalence GP practices.

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# 1. Introduction:

Public Health England (PHE) and the Elton John AIDS Foundation (EJAF) collaborated to co-fund a project aimed at increasing HIV testing in communities with high incidence of HIV and high rates of late diagnosis.

The successful project, led by Leeds City Council was funded to run for 12 months from November 2015. Three Leeds CCGs committed additional funding to enable the project to implement a Blood Borne Virus (BBV) rather than a standalone HIV approach, enabling screening for HBV & HCV.

The project aimed to offer all new patients (16-65) BBV tests at registration in GP surgeries located within high HIV prevalence areas.

Practices were challenged to screen 70% of their eligible patients which we predicted would generate 16,000 additional screens in Leeds

# 2. Method:

31 out of a potential 40 practices signed up to the pilot. Practices were paid a £500 sign up fee on the completion of training (minimum of two members of staff) and received £7 per screen.

Information posters and leaflet were provided in English, Arabic, Tigrinya and Czech.

A BBV template was added to the central spine which could be downloaded by practices to the new patient check.

Activity was measured via monthly reports outlining both their monthly and cumulative data, % of eligible patients screened, % of

patients still to screen, payments made and potential loss of earnings.

A six month league table was also produced and circulated.

A steering group including GP representatives met on a quarterly basis.





In this practice it is normal for us to offer screening for HIV and also Hepatitis B & C to all new patients.

Produced by Challed and Service Continuation Service Continuation

# 3. Results:

**3,653** new patients screened (18.55% of the eligible population)

**478** existing patients screened (not counted in the overall % but paid for)

#### **Positivity**

- **8** cases of HIV = 2.2 per 1000
  - **26** cases of HBV = 7.1 per 1000
- **6** cases HCV = 1.6per 1000
- Overall yield of 10.9 per 1000

### **Performance of practices**

Ranged between 67% to 0.3% of eligible patients

# 4. Conclusions:

Phase 1 of the pilot is currently being evaluated however, interim findings demonstrate high patient acceptability and positivity rates.

Feedback so far has indicated that the scheme and associated training

has increased healthcare workers' awareness and confidence in offering BBV screening.

Initial findings also suggests that face to face new patient registrations as well as effective leadership from Practice Management were contributing factors within high performing practices.