

HIV Testing and Community Planning

Los Angeles County HIV Testing Summit

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Agenda

- History of the HIV Counseling and Testing (HCT) Work Group
- How HCT is incorporated into the PPC
- Accomplishments:
 - HCT Recommendations
 - Job Competencies
 - Youth Linked Referral Protocol
 - New Technologies Presentations
 - This Summit



Background/History

- Pre-2005: Mobile Testing Work Group
- 2006: HCT Work Group forms
- 2007: The PPC accepts the HCT Work Group's Recommendations (not contract-related)



How Things Get Done

**HCT WORK
GROUP**

**STANDARDS
& BEST
PRACTICES**

**PPC
EXECUTIVE
COMMITTEE**

FULL PPC



Accomplishments



- HCT Recommendations
- Job Competencies
- Youth Linked Referral Protocol
- New Technologies Presentations
- This Summit



Recommendation	Action Taken
Increase percentage of allocation of the HIV Testing service category	 Completed: Allocation was increased to 30%
Recommend that targeted testing of high risk individuals remain a priority	 Completed: The Prevention Plan identifies Target Populations and Critical Target Populations
Support targeting testing within highly impacted areas with HIV/AIDS	 Completed: The Prevention Plan identifies zip codes and all OAPP HIV testing events target high-impact areas



Recommendation	Action Taken
Allow for new HIV testing technologies and algorithms, when possible	 Ongoing: Implemented rapid testing algorithm/ NAATT
Support counseling and testing models that consider repeat and low risk testers and allow for self-assessed risk assessments	 Ongoing: Two-tier model
Support Multiple Morbidity testing in appropriate settings	 Completed: 3 MTUs are funded
Recommend that testing occur in high-risk venues	 Ongoing



Recommendation	Action Taken
Support that all clients in Health Education Risk Reduction (HERR) programs know their HIV status	 Completed: Objective included in all HERR SOW
Recommend that HERR programs, where appropriate, provide access to HIV testing either directly or through partner relationships w/ other organizations	 Ongoing: Expectation that HERR programs collaborate with HCT providers
Recommend that all HIV/AIDS social marketing efforts encourage HIV testing	 Ongoing: All OAPP campaigns promote testing



Recommendation	Action Taken
Recommend that all counselors are cross-trained (e.g. substance use, hepatitis)	 Completed: Included in contract language
Incorporate and increase collaboration and referrals with PCRS (Partner Services) in care settings and prevention settings. Should be continually offered.	 Ongoing: Training required of HCT counselors. Assessment of testing agencies re: Partner Services
Recommend HIV testing efforts in incarcerated settings	 Completed & Ongoing: Public Health Department Jails testing project (OAPP and STD Program)



Recommendation	Action Taken
<p>All HCT data collection instruments and efforts will be reviewed and updated to reflect the new planning model.</p>	<p> Completed</p>
<p>Recommend that trainings are available to ensure capacity of providers to implement HCT services</p>	<p> Ongoing: Training on 2-tier model; Quarterly HCT Coordinator's training (first one February 1, 2010) Several trainings in OAPP's training calendar and PPC's SBP and HCT Workgroup to identify trainings.</p>



The HCT Work Group also...

- Voted to adopt the UCHAPS recommendations
- Supports the CDC's HIV Testing Guidelines in Health Care Settings, and also recommends that the priority for testing services should focus on high risk individuals.



Job Competencies:

Basic: must be achieved within 6 months of hire

Be a Certified HIV Counselor
Excellent oral communication skills, ability to build rapport with clients (i.e. customer service skills, outreach, open ended questions) and talk openly about sex and sexual risk taking behaviors.
Basic Knowledge of STD's, HIV, Hepatitis and Tuberculosis transmission and treatment.
Knowledge of substance abuse issues and treatment, and related sexual risks.
Knowledge of target population, inclusive of cultural competency and sensitivity, including that of persons living with HIV.
Understanding of confidentiality and (legal) consequences of failure to abide.
High School Diploma and/or successful completion of GED.
Basic computer skills, knowledge of word processing, data entry, and use of internet and internet research.
Ability to manage time efficiently, meet deadlines and adapt to fast pace environments.
Ability to research, identify and access community referrals.
Demonstrate proficient written-documentation skills: notes, written terminology, process, short/long term goals, follow-up, and referrals.
General understanding and awareness of professional boundaries.
Ability to demonstrate basic skills of risk behavior assessment. Motivate clients to modify HIV risk taking behaviors and substance use behaviors.
Valid California Drivers License and proof of insurance and/or ability to access reliable transportation. (Applicable to program need)
Bilingual/Multilingual speaking and understanding of multicultural issues. Applicable to program need
Organized, able to maintain client files, charts and test results.
Ability or experience in the disclosure of life altering conditions.
Knowledge of HIV prevention and care services and/or ability to research and identify accessible services.
Knowledge of HIV case reporting.



Job Competencies:

Preferred: in addition to basic competencies

Certified in HIV Rapid Testing and Phlebotomist.
Two years experience working in HIV prevention services, working with HIV-positive individuals and/or have disclosed an HIV positive test result.
Trained in co-morbidities: HIV, STD's, Hepatitis and Tuberculosis transmission and treatment.
Cross trained in drug and alcohol assessment/risk behaviors: harm reduction and risk reduction.
Extensive knowledge and experience working with t groups at risk for HIV, including, people who share injection equipment, Youth and the LGBT Community.
HIPPA certified and knowledge of informed consent.
Bachelor's degree or two years experience in a human services related field.
Experience with one or more of the following HCT data base programs: HIV 5-6, HIRS or ELI.
Demonstrate ability to manage time efficiently, meet deadlines, multi-task and adapt to fast-paced environments.
Working knowledge of community services and resources.
Experience in creating client services plan. Experience in data collection and reporting.
Understanding of dual relationships with staff and clients, internal and external customers, and off site work environments.
Understanding of the various effects of individual drugs, knowledge of substance related risk behaviors and corresponding treatment and services
Clean driving record, ability/experience in driving a Mobile Unit/RV and/or possess a class B driver's license. Applicable to program need)
Bilingual/Multilingual – Ability to speak and write proficiently. Applicable to program need)
Knowledge of current HIV treatment modalities.
Experience in extensive methods of follow-up and linked access to services.
Experience in conducting a psychosocial assessment and/or working individually with clients in a counseling capacity.
Experience in HIV case reporting.



Youth Linked Referral Protocol

- Provides guidelines for working with Youth
- Discusses limits to confidentiality
- Tips on how to assess testing readiness
- Steps for delivering a preliminary positive



Youth Linked Referral Protocol

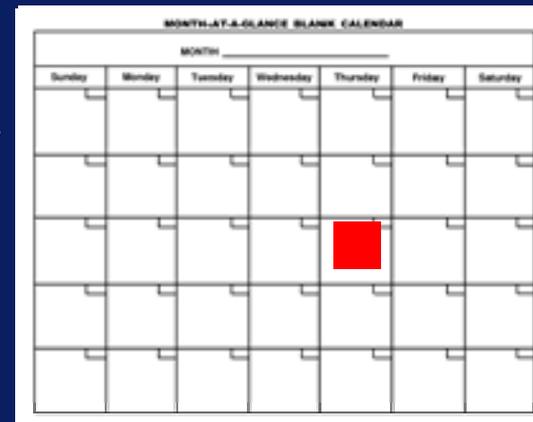
- Steps for delivering a confirmatory positive
- Explains the difference between CCS, Medi-Cal, and Ryan White Programs
- Provides a clear guide for reporting requirements.



Get Involved!

- 3rd Thursday of every month from 10:30-12:30

Office of AIDS Programs and Policy
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- February 18th meeting will set the 2010 Work Plan
(Linkages to care)

