

Developing a Training Course for Community-Based HIV Testing

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Background

The Centers for Disease Control (CDC) recommends routine HIV testing for all individuals between the ages of 13 to 64 years. The United States Preventive Services Task Force (USPSTF) recommends routine HIV testing for all individuals between the ages of 15 to 64 years. Community-based HIV testing is an effective strategy for reducing barriers to care and promoting routine testing. In Rhode Island, all non-medically trained personnel are required to have a license to test for HIV in the community. Prior to this project, there was one accepted standard curriculum, the Qualified Professional Test Counselor (QPTC) course, where individuals could receive the mandatory license. This course was offered only twice a year and had limited accessibility, especially for students. The objective of this project was to develop, implement, and evaluate an integrated HIV testing and counseling training program through the Alpert Medical School of Brown University. The main goals of the course were to offer students the opportunity to learn about HIV, train them to perform community-based HIV testing, and provide an additional option for those seeking licensure in order to increase the numbers of HIV testers in the community.

Methods

We designed an 8-week course that offered comprehensive educational content encompassing the following topics as recommended by the CDC and the RI State Department of Health: HIV, viral hepatitis, other sexually transmitted infections (STIs), point-of-care prevention counseling, rapid testing for HIV and hepatitis C virus (HCV), and state reporting and regulations. The faculty instructors were local experts in their fields, served as preceptors for clinical observation time, and provided teaching materials for the didactics. The course included 5 evening classes, 2 online modules, and clinical observation time. The course was evaluated by post-class online surveys to assess the content, instruction, and structure of each session. In a final evaluation, students were asked to rate their overall satisfaction with the course, the clarity of the content, and the course organization on a 5-point rating scale.

Results

A total of 50 individuals were enrolled in 3 courses held once a year from 2013 to 2015. The average class size was 16 students: 46% of the students were medical students, 42% were individuals affiliated with local hospitals or AIDS/HCV outreach organizations, and 12% were affiliated with other schools or departments at Brown University (School of Arts and Sciences, School of Public Health, etc.). In this study, 80% of enrolled students completed and passed the course. Using 5-point rating scales on the final course evaluation, students rated their satisfaction with the course on average 4.7, the clarity of content 4.5, and the organization 4.6. The majority (93%) of survey respondents found the course to be useful for their career goals and education. The course successfully licensed 42 new community-based HIV testers for the state of Rhode Island.

Conclusion

We successfully developed a state-approved community-based HIV testing course accessible to both students and community health workers. The course increased the number of individuals licensed to conduct community HIV testing in Rhode Island. The curriculum satisfied and exceeded the existing requirements for licensure and is being used as a model for the new state curriculum for licensure of community-based HIV testers.