

The OptTEST Project – overall conclusions/outcomes and today's programme

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OptTEST – background and objectives

- Optimising testing and linkage to care for HIV across Europe
- June 2014 – September 2017
- The HIV in Europe Initiative
 - Representation from patient advocacy, policy makers, health professionals and European public health institutions
 - Building on previous projects ie the HIDES study (HIV Indicator Conditions across Europe) and support for inclusion of questions on testing in the Stigma Index
- Focus on testing in health care settings and systemic barriers to testing (cost-effectiveness/legal barriers/linkage to care etc.)



Specific Objectives

- 1) To improve multi-profession, multi-country stakeholder dialogue to develop strategies to improve early diagnosis and care of people with HIV across Europe by 2016.
- 2) To increase knowledge on linkage to and retention in HIV care after diagnosis across geographical and healthcare settings and target groups by 2016.
- 3) Create understanding and suggest evidence-based solutions to provider barriers to testing through pilot implementation of a novel HIV testing strategy (Indicator Condition-guided) in selected European healthcare settings and countries by 2016.
- 4) To assemble and evaluate various existing HIV testing strategies in Europe by 2016.
- 5) To increase knowledge of how stigma and legal barriers to HIV testing affects the uptake of HIV testing and treatment, particularly in most affected groups and regions by 2016.

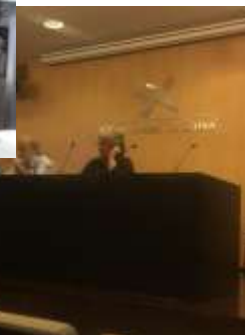
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CORE WORK PACKAGES

	WP 4	WP 5	WP 6	WP 7
Primary stake-holders	National healthcare authorities	Health care providers and commissioners; Health care decision makers and national authorities; Specialty Groups/Societies Key populations	Health authorities making policy and public spending decisions	PLHIV Networks; Health Care Providers Community Based Organisation
Secondary stake-holders	Healthcare decision makers; Scientific community, Public health bodies like ECDC, WHO, UNAIDS, EMCDDA, etc.) Civil society organisations working on screening and treatment issues	Medical schools, nursing education (including post graduate), specialist training programmes for junior doctors. Special interest groups –Lab-based staff IT staff Commercial companies – HIV testing technology, indicator condition/HIV drug companies	Scientific community; Public health bodies like ECDC, WHO, UNAIDS etc. Key populations Civil society actors involved in testing media	Key populations, as defined by WHO; Legal and regulatory authorities
Key Messages		All individuals have a right to know their HIV status; Indicator condition driven testing is an effective strategy to deliver this; normalising testing and removing potential provider based barriers;		Stigma and Legal /Regulatory barriers negatively impact upon the treatment continuum
Goals	Disseminate a standard methodology for linkage to care	Spread the knowledge and application of indicator based testing	Disseminate knowledge about cost-effective testing Influence political decisions	Provision of guidance and good practice examples that enable stakeholders to address these issues in country

OptTEST Meetings



OptTEST Reception in conjunction with the 19th IAS Conference on HIV Science (IAS 2017) on 23-28 July 2017 at the Palais des Congrès in Paris, France

How to increase HIV testing

Launch of tools developed to optimise HIV testing and linkage to care

Time and venue:
20:30 – 22:30h; 23 July 2017,
Salon Maroñas, Hotel InterContinental,
64 Avenue Maroñas, Paris

Background:
The multidisciplinary collaborative EU
co-financed project Optimising testing and
linkage to care for HIV across Europe
– OptTEST – is coming to an end after
3 years of intensive work.

The work has been focused on four areas:

- Analysing data on linkage to HIV treatment and care and improving collaborations on national level
- Developing tools to facilitate implementation of indicator condition (IC) guided HIV testing in primary care and other clinics
- Modelling the cost-effectiveness of different HIV testing approaches
- Developing tools on how best to address stigma and legal and regulatory barriers to HIV testing

The developed tools and examples of their implementation will be presented at this reception.



Conferences



HepHIV 2017
31 JANUARY-2 FEBRUARY · MALTA



268 participants
from 42 countries
Next: HepHIV,
Romania 2019

Dialogue through social media

OptTEST @OptTESTbyHiE · 26. jul.
#IAS2017 #HIV The OptTEST project presented a number of ways to optimise HIV testing and linkage to... fb.me/wiyuQaL
Oversæt fra engelsk

OptTEST @OptTESTbyHiE · 16. maj
During the #BHIVA2017 conference in April, WP4 of the #... ran a quality of care data drop-in clinic...
Oversæt fra engelsk

OptTEST @OptTESTbyHiE · 22.
Sergey Golovin, who is not only a doctor but also a... currently takes care of the viral...
Oversæt fra engelsk



Sergey Golovin
Sergey Golovin
youtube.

OptTEST by HiE
Offentliggjort af Tamas Bereczky [?] · 24. august kl. 13:09 · 
As we are getting ready for the OptTEST conference on 19 September, here is another interesting presentation from Lisa Power who, together with other OptTEST team members, has developed an excellent mapping and toolkit together with guidances and best practices for barriers to testing across Europe, and also how you can overcome those barriers.

Facebook followers **#106**

Twitter followers **#237**

Total number of tweets **#918**

Website – year 3 statistics

Number of sessions: 3.571

Number of users: 1.732

Number of page views: 16.151

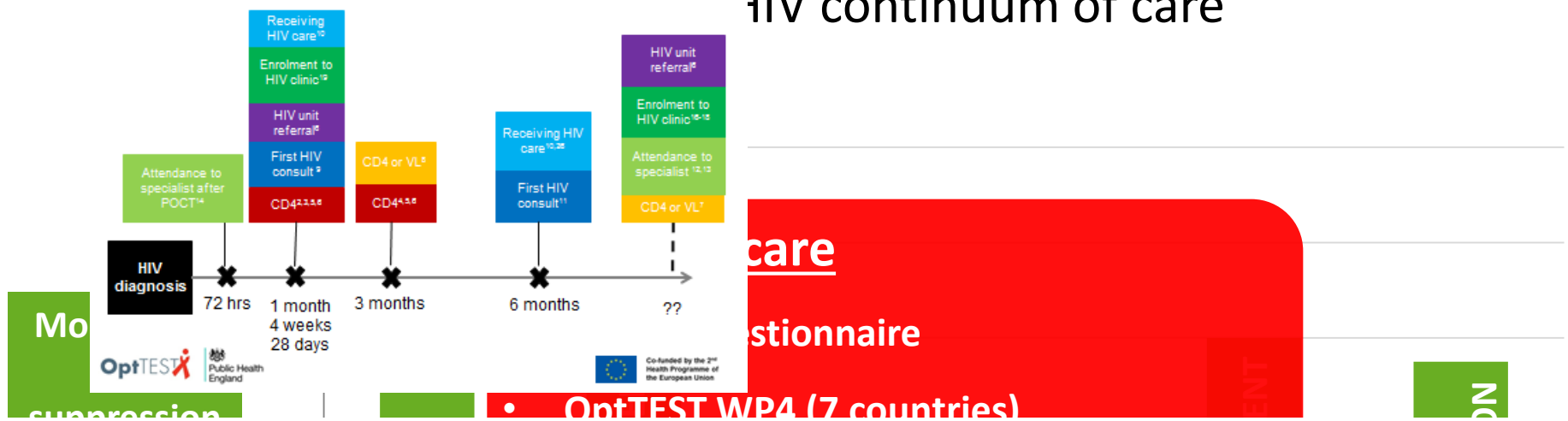
52,4% new visitors, 47,6% returning visitors

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Definitions of linkage to care in the literature

HIV continuum of care



Linkage to care: the proportion of patients seen for HIV care (measured by first CD4 count and/or viral load and/or attendance date and/or treatment start date) within 3 months of diagnosis

quality of care

-40
-60
-80

LINKAGE TO

"This is the first time the different stakeholders get together to openly communicate in an effort to improve linkage to care",
National stakeholder meeting,
Athens, september 2016


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Available online tool to audit/monitor testing (for indicator conditions)

HIDES Audit

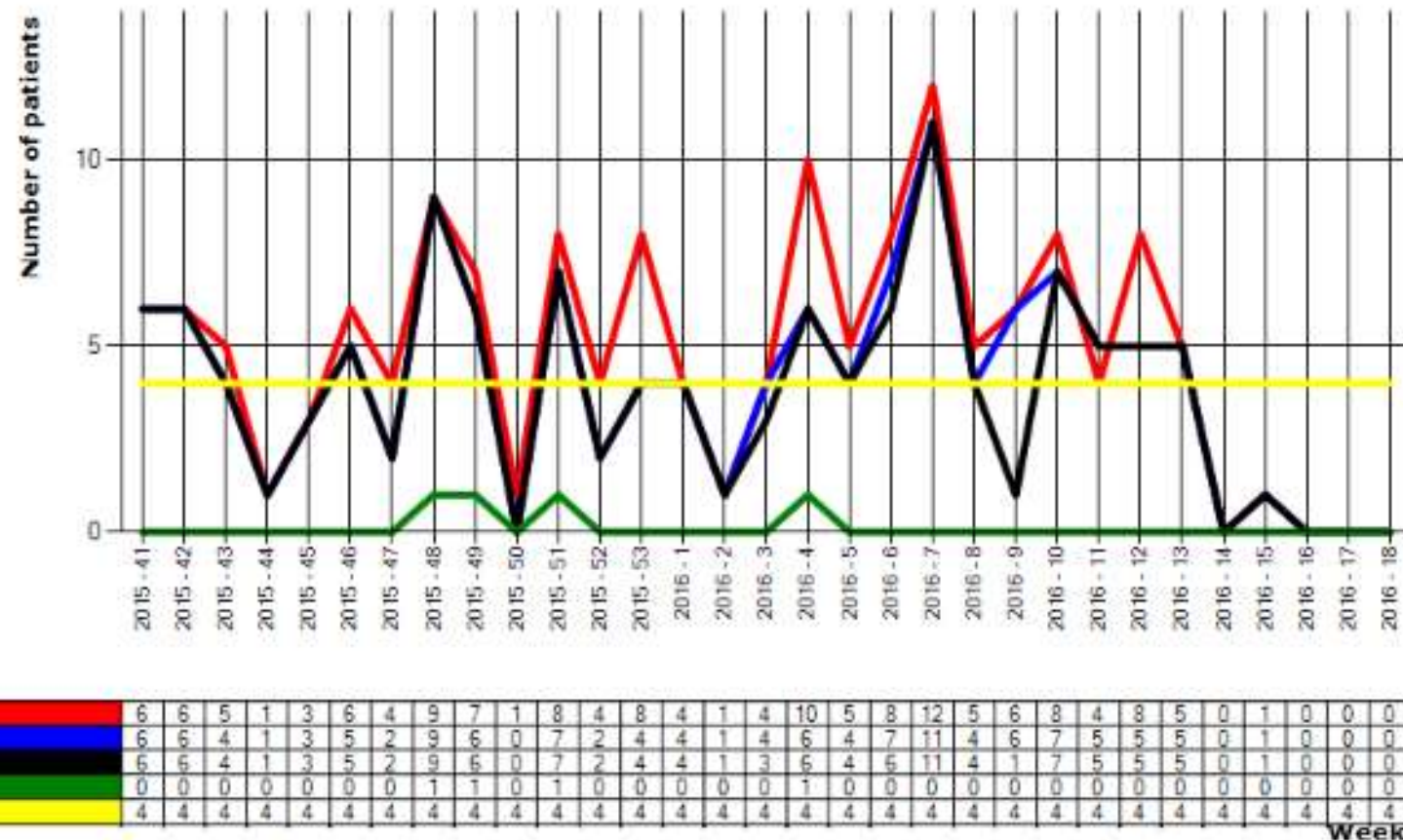
Re-assign this record to another Data Access Group? 1000

 Editing existing Audit ID: 1000-A

Audit ID:	1000-A
How many patients with:	<p><input checked="" type="radio"/> A) Tuberculosis</p> <p><input type="radio"/> B) Non-Hodgkin's lymphoma</p> <p><input type="radio"/> C) Anal cancer</p> <p><input type="radio"/> D) Cervical cancer</p> <p><input type="radio"/> E) Hepatitis B and C</p> <p><input type="radio"/> F) Candida esophagitis</p>
who were not yet known to be HIV positive have you seen in your clinic within (specify dates beneath):	<p><input type="text" value="126"/></p> <p><small>* must provide value</small></p>
From:	<p><input type="text" value="01-01-2010"/></p>
To:	<p><input type="text" value="31-12-2011"/></p>
How many of these have been offered an HIV test:	<p><input type="text" value="115"/></p>
How many of these have been HIV tested:	<p><input type="text" value="115"/></p> <p><small>* must provide value</small></p>
How many were HIV positive:	<p><input type="text" value="5"/></p>

Show

— Mean of offered



2. EXAMPLE OF TESTING PATHWAY IN ACUTE MEDICAL ADMISSION UNIT OR INPATIENT WARD

HIGHLI

LEAFLE

INFORT

Our PDSA (Plan, Do, Study, Act)

- Plan:
 - to introduce IC testing in Pola
- Do:
 - Emergency Department HIV t
- Study:
 - more patients than expected have gotten used to the new
 - it is easy to see the improvem
- Act:
 - From one centre example to a



**¿Quieres mejores
servicios en cuanto a
diagnóstico precoz del
VIH en tu centro de
atención primaria??**

Dos preguntas en un minuto.

healthcare assistant

ward or discharged

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Heat maps considering the most cost-effective

Changes in national HIV testing policies

- France :

- High-risk populations

- **MSM** should be tested
 - **PWID** should be tested
 - Migrants from sub-Saharan Africa should be tested every 12 months

- General population: HIV testing for the entire life should be made available and attention to

- Men
 - Regions with a high undiagnosed HIV prevalence

ændre deres rækkefølge, placering og rotation.

Du kan også holde flere objekter samlet, så de bliver behandlet som et enkelt objekt.

Réévaluation de la stratégie de dépistage de l'infection à VIH en France

This would be great support for our policy making and practice. We are now developing new HIV guidance which will be hopefully ready by March 2019. So all local data are very important.

Estonia, July 2017

Mean CD4 at diagnosis

410
370
330
290

OptTEST

Annual Incidence Rate (/100PY)



Co-funded by the 2nd Health Programme of the European Union

Annual Incidence Rate (/100PY)

3.0

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This database shows the most common legal and regulatory barriers to HIV testing, linkage to care and treatment access across Europe and in each individual European country, including how they affect particular key populations.



<http://legalbarriers.peoplewithhiveurope.org/>

The site covers 53 countries of the WHO Europe region

Thanks to all those who contributed – the data is up and live and has gone through several refinements

The site is being updated on an iterative basis

Tip sheets

[Simple principles for effective campaigning on legislative or regulatory change](#)

[What types of legal and regulatory barriers are common and how do they damage access?](#)

[What are the new testing strategies and where are they working?](#)

[How can I identify and verify local barriers to testing and treatment access?](#)

[How can I construct or compare a community training?](#)

[How can we do a simple, quick, low-cost survey?](#)

[How and where do I find evidence?](#)

[How can we build alliances between community and policy?](#)

[How should we present our case to decision makers?](#)

[Influencing at conferences and other events?](#)

[Questions you should ask yourself when talking to a Minister](#)

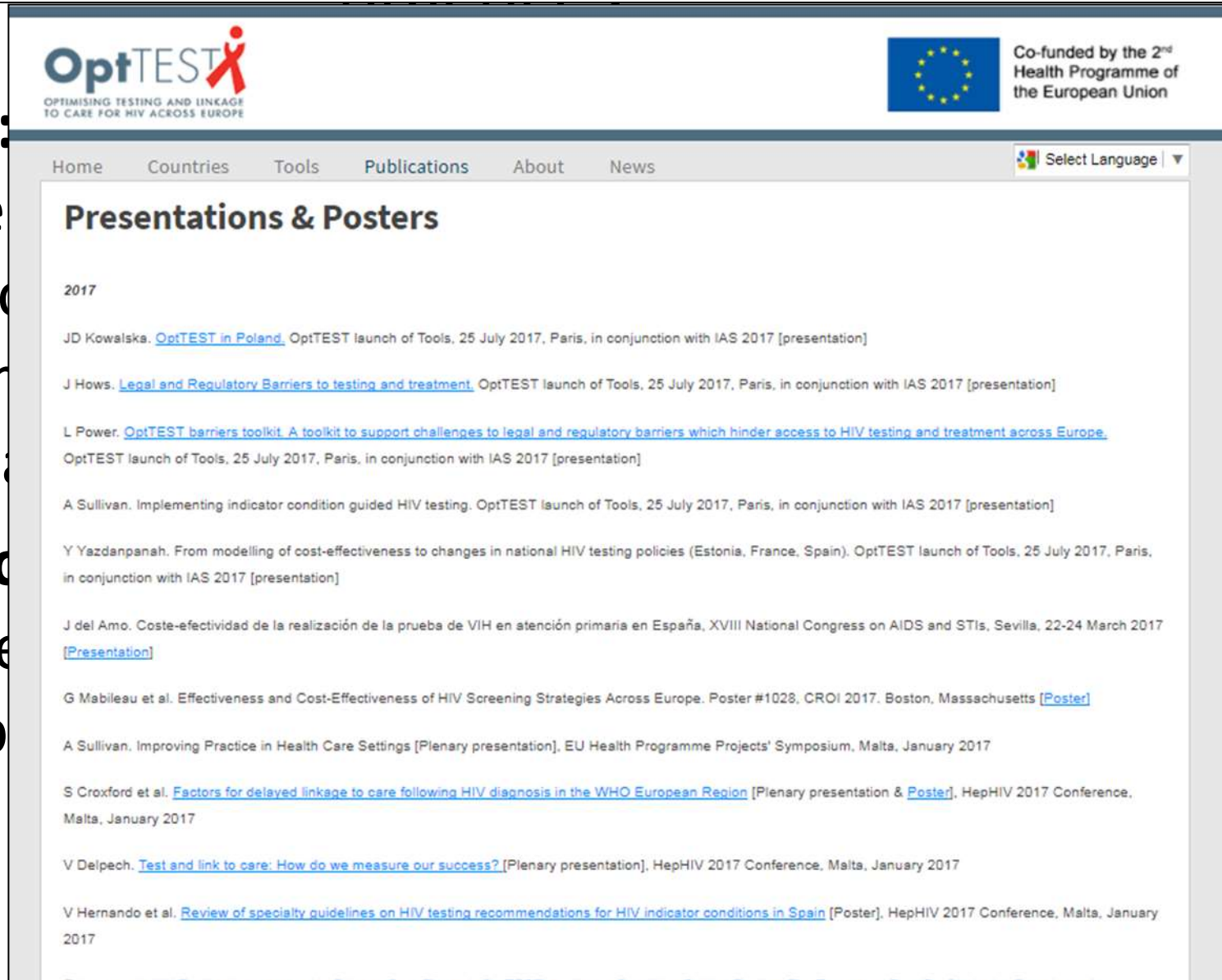
[What can we do when politicians ignore the evidence?](#)

“A community training on addressing punitive and restrictive legal environments hindering early HIV diagnosis and linkage to care drawing on the OptTEST research, interventions and advocacy toolkit on legal and regulatory barriers. Over 90 community activists applied and 25 participants from across Europe were selected to take part in this training”
September 2017, Berlin

ent

... and presentations/publications

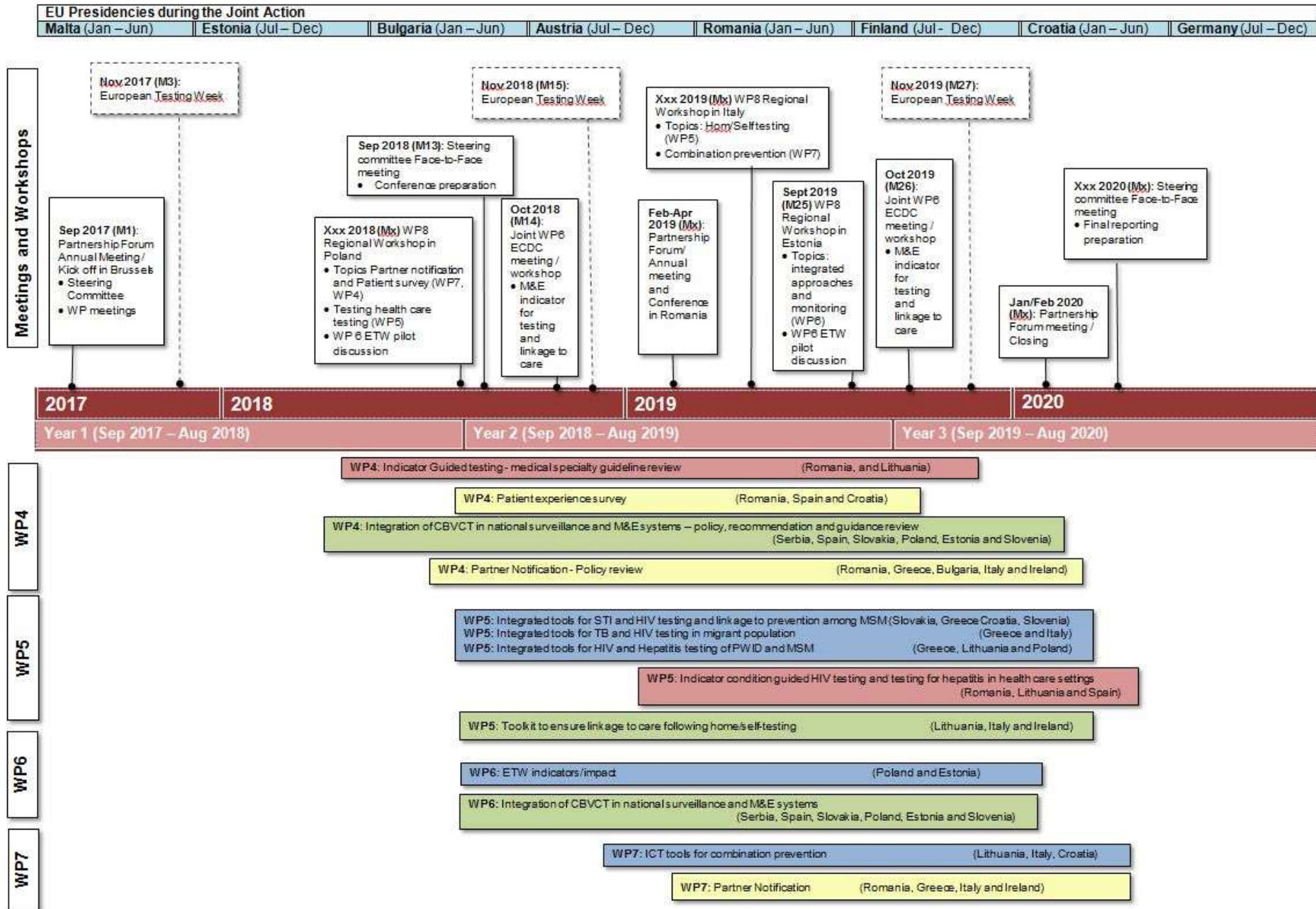
- Tools:
 - imple
 - metho
 - docur
 - stigma
- Collec
- and re
- datab



The screenshot displays the OptTEST website interface. At the top, the OptTEST logo is on the left, and the European Union flag with the text 'Co-funded by the 2nd Health Programme of the European Union' is on the right. A navigation bar includes links for Home, Countries, Tools, Publications, About, and News, along with a 'Select Language' dropdown. The main content area is titled 'Presentations & Posters' and lists several 2017 events:

- 2017**
- JD Kowalska. [OptTEST in Poland](#). OptTEST launch of Tools, 25 July 2017, Paris, in conjunction with IAS 2017 [presentation]
- J Hows. [Legal and Regulatory Barriers to testing and treatment](#). OptTEST launch of Tools, 25 July 2017, Paris, in conjunction with IAS 2017 [presentation]
- L Power. [OptTEST barriers toolkit. A toolkit to support challenges to legal and regulatory barriers which hinder access to HIV testing and treatment across Europe](#). OptTEST launch of Tools, 25 July 2017, Paris, in conjunction with IAS 2017 [presentation]
- A Sullivan. Implementing indicator condition guided HIV testing. OptTEST launch of Tools, 25 July 2017, Paris, in conjunction with IAS 2017 [presentation]
- Y Yazdanpanah. From modelling of cost-effectiveness to changes in national HIV testing policies (Estonia, France, Spain). OptTEST launch of Tools, 25 July 2017, Paris, in conjunction with IAS 2017 [presentation]
- J del Amo. Coste-efectividad de la realización de la prueba de VIH en atención primaria en España, XVIII National Congress on AIDS and STIs, Sevilla, 22-24 March 2017 [Presentation]
- G Mabileau et al. Effectiveness and Cost-Effectiveness of HIV Screening Strategies Across Europe. Poster #1028, CROI 2017. Boston, Massachusetts [Poster]
- A Sullivan. Improving Practice in Health Care Settings [Plenary presentation], EU Health Programme Projects' Symposium, Malta, January 2017
- S Croxford et al. [Factors for delayed linkage to care following HIV diagnosis in the WHO European Region](#) [Plenary presentation & Poster], HepHIV 2017 Conference, Malta, January 2017
- V Delpech. [Test and link to care: How do we measure our success?](#) [Plenary presentation], HepHIV 2017 Conference, Malta, January 2017
- V Hernando et al. [Review of specialty guidelines on HIV testing recommendations for HIV indicator conditions in Spain](#) [Poster], HepHIV 2017 Conference, Malta, January 2017

Meetings and Pilot Activities



OptTEST by HiE Partners



Co-funded by the 2nd Health Programme of the European Union



HIV in Europe

Working Together for Optimal
Testing and Earlier Care

that has received unrestricted funding from:

Platinum partner



Gold partners



Silver partner

abbvie

Today's programme

- Morning 8:30-14:30

	Sessions: OptTEST and HivEdat
09:15-10:15	Ways to overcome barriers to HIV testing with new approaches
10:45-12:00	Tools for innovative testing strategies
13:00-13:30	Improving linkage to care
13:30-14:30	Cost-effectiveness and monitoring of HIV testing

Today's programme

- Afternoon 15:00-18:30

	INTEGRATE
15:00-17:15	Linking experiences from previous and ongoing EU-funded projects to INTEGRATE
17:15-18:30	Panel Discussion – Moving towards integration of HIV, hepatitis, TB and STIs

THANK YOU