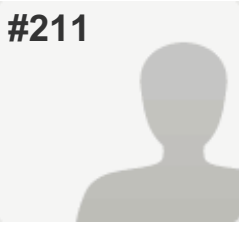


Ending the Epidemic Task Force Recommendation Form

#211



COMPLETE

Collector: Web Link (Web Link)

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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name	Rich
Last Name	Fowler
Affiliation	Trillium Health
Email Address	rfowler@trilliumhealth.org

Q2: Title of your recommendation Provider education to support routine HIV testing

Q3: Please provide a description of your proposed recommendation

To assist health care providers toward compliance with routine HIV testing regulations continued education is needed. I recommend working with local or regional medical societies to provide training opportunities for medical professionals to assist with techniques to encourage routine HIV testing.

While educational opportunities have been made available through the HIV Clinical Education Initiative these do not appear to have reached many private practitioners or those in our rural communities.

Routine testing also provides a vehicle to provide prevention messaging and introduce PrEP for those with identified risk factors.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Identifying persons with HIV who remain undiagnosed and linking them to health care

Facilitating access to Pre-Exposure Prophylaxis (PrEP) for high-risk persons to keep them HIV negative

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Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Prevention Committee: Develop recommendations for ensuring the effective implementation of biomedical advances in the prevention of HIV, (such as the use of Truvada as pre-exposure prophylaxis (PrEP)); for ensuring access for those most in need to keep them negative; and for expansion of syringe exchange, expanded partner services, and streamlined HIV testing by further implementing the universal offer of HIV testing in primary care, among others. The Committee will focus on continuing innovative and comprehensive prevention and harm reduction services targeted at key high risk populations, as well as grant-funded services that engage in both secondary and primary prevention.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

New program

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Permitted under current law

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next year

Q9: What are the perceived benefits of implementing this recommendation?

Respondent skipped this question

Q10: Are there any concerns with implementing this recommendation that should be considered?

Respondent skipped this question

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Respondent skipped this question

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

Respondent skipped this question

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

Respondent skipped this question

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Respondent skipped this question

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Q15: This recommendation was submitted by one of the following Consumer