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10.1111/hiv.12513

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Abstract Template – BHIVA Annual Conference 2017

Title: Healthcare professionals questionnaire evaluation of an education intervention to strengthen their HIV testing in high HIV prevalence general practices in a city within the Southwest of England

• Please do not add the names of authors or affiliations on this form
• Use a concise title that indicates the nature of the study.
• Please capitalise the first letter of the title and use lower case for the rest of the title (with the exception of proper nouns or abbreviations).
  e.g. Recall of men who have sex with men diagnosed with bacterial sexually transmitted infections for retesting: a feasible and effective strategy?
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Abstract:

Background
To encourage appropriate HIV testing, a city council commissioned an education intervention in GP-practices with high HIV prevalence within a city in Southwest England. We report on a questionnaire administered to obtain feedback on the appropriateness and usefulness of the training from participant healthcare professionals’ (HCPs).

Methods
Education sessions (~1-hour) based on the MEDFASH ‘HIV testing in practice’ online educational tool were delivered as a stepped-wedge randomised controlled trial in 19 GP-practices with a high HIV practice population prevalence (>2/1000). Feedback on the training was via paper-based evaluation questionnaires completed immediately after the training. Mean scores for seven statements were calculated using a 4 point scale (1=strongly disagree, 2 = disagree, 3= agree, 4= strongly agree).

Results
Training sessions were attended by 169 HCPs of whom 93 were GPs, 53 nurses and 23 ‘others’ (e.g. practice manager). 127 (75%) of evaluation questionnaires were completed. Mean scores were above 3 for the following statements: ‘I can apply the information gained from the training in my practice setting’ and ‘The trainer actively involved me in the learning process’ scored the highest (mean score 3.7). Statements that participants were ‘more aware of the BHIVA and NICE guidelines on HIV testing’ scored the lowest (mean score 3.4). Three statements ‘The training met my professional educational needs’ and ‘As a result of the training I feel more confident in my ability to discuss HIV testing with a patient’ and ‘More confident in my ability to conduct HIV testing’ all received a mean score of 3.6. When participants were asked: What do you feel were the strengths of the training? Examples of free-text responses included: “Interactive”, summarised risk factors, who to test, how to refer” and “Raising awareness, information about prevalence and presenting symptoms to be aware of”. When asked: Would you do anything differently in your practice setting as a result of this training? Responses included “Yes offer testing to more patients, be more aware of those needing testing” and “Yes more likely to offer as part of routine tests”.

Conclusion
The delivery of the HIV training was received positively by the majority of HCPs, who gained more awareness of BHIVA and NICE HIV testing guidelines. HCPs reported feeling more confident around discussing and conducting an HIV test immediately post training.