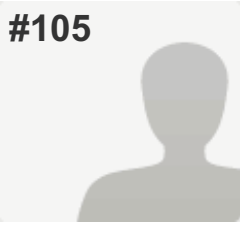


# Ending the Epidemic Task Force Recommendation Form

#105



**COMPLETE**

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

First Name	Gale
Last Name	Burstein
Affiliation	Erie County Department of Health
Email Address	gale.burstein@erie.gov

**Q2: Title of your recommendation** Expand school-based health center rapid HIV testing

**Q3: Please provide a description of your proposed recommendation**

NYS grant-funded school-based health centers (SBHC) exist in many high schools throughout NYS that serve a population that is right risk for HIV and STIs and difficult to access to care. Funding should be made available in the NYS SBHC grants to fund development and start up for a rapid HIV testing program

**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

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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.

Care Committee: Develop recommendations to support access to care and treatment in order to maximize the rate of HIV viral suppression. The Committee will promote linkages and retention in care to achieve viral suppression and promote the highest quality of life while significantly decreasing the risks of HIV transmission. Recommendations will also ensure a person centered approach is taken and that access to culturally and linguistically appropriate prevention and health care services is available.

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

Other (please specify)  
Change to existing policy and change to existing 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?**

Many at-risk youth do not access health care services, including HIV testing. SBHCs offer a proven benefit of increasing access to confidential, sexual health care for difficult-to-reach youth. SBHCs are the perfect setting to offer confidential health services.

SBHC rapid HIV testing availability has the potential benefits of

- Increasing HIV testing services by at-risk youth
  - Increasing all sexual health services by at-risk youth
  - Increasing use of SBHC for health services by youth in schools
  - Increased identification of HIV infected youth and linkages into care
- o HIV+ youth could be monitored for compliance of treatment at SBHC

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

School policy may not permit rapid HIV testing  
Parents may oppose  
SBHC staff may feel uncomfortable with offering rapid HIV testing  
Expense and staff time  
Training needs  
Establishing referral system for positives

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

Cost of training, purchasing kits, staff time for testing and quality control program, cost of school and community buy in.

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

Savings associated with receipt of early HIV diagnosis and treatment in persons who otherwise would not access health care

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

Adolescents  
Schools  
SBHCs

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

# of SBHCs offering rapid HIV testing  
# of rapid HIV tests performed

**Q15: This recommendation was submitted by one of the following** Ending the Epidemic Task Force member