

Connecticut Routine Testing Sites (RTS) January-December, 2021 Report



Scan this QR Code for more information regarding **CDC recommendations** on routine HIV testing in healthcare-settings

What are Routine Testing Sites?

Routine Testing Sites (RTS) is an HIV testing intervention geared towards increasing HIV screening of patients, including pregnant women, in health-care settings. The RTS intervention fosters earlier detection of HIV infection; identify and counsel persons with unrecognized HIV infection and link them to clinical and prevention services; and further reduce perinatal transmission of HIV in Connecticut.

CDC Recommendations

CDC recommends that everyone between the ages of 13 and 64 get tested for HIV at least once as part of routine health care and those at high risk get tested at least once a year. Some sexually active gay and bisexual men may benefit from more frequent testing (every 3 to 6 months).¹

For patients in all health-care settings

- HIV screening is recommended for patients in all health-care settings after the patient is notified that testing will be performed unless the patient declines (opt-out screening).²
- Persons at high risk for HIV infection should be screened for HIV at least annually.
- Separate written consent for HIV testing should not be required; general consent for medical care should be considered sufficient to encompass consent for HIV testing.
- Prevention counseling should not be required with HIV diagnostic testing or as part of HIV screening programs in health-care settings.

For pregnant women

- HIV screening must be included in the routine panel of prenatal screening tests for all pregnant women.³

Reporting Requirements

Agencies funded (directly or given HIV testing supplies) are required to report data to the Connecticut Department of Public Health.

The annual report required agencies implementing the RTS intervention to document the following data points.

Demographic:

- Date of Birth-Year
- Race/Ethnicity
- State/Territory of Residence
- Assigned Sex at Birth and Current Gender Identity
- Client County

Priority Populations:

- Sex with male
- Sex with female
- Injection drug use
- Sex with transgender

HIV Testing:

- Previous HIV test
- HIV Test Election
- Result Provided
- Test Type
- HIV Test Result-Final Determination

Linkages:

- Medical care (**HIV+**)
- Partner services (**HIV+**)
- Prevention Services (**HIV+/HIV-**)

1. "Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings," Center for Disease Control and Prevention, accessed October 28, 2019, <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>

2. General consent required for HIV-related testing. Counseling requirements. Exceptions, CT Gen Stat § 19a-582 (2012)

3. "Revised Recommendations for HIV Testing of Adults...", 1

For more information, call 860-509-7821 or

Email: susan.major@ct.gov

Data report created by: RRS

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How Does RTS Benefit Communities and Public Safety?

About 1.1 million people in the United States have HIV, and 1 in 7 of them don't know they have it.⁴

By ensuring that everyone with HIV is aware of their infection, receives the treatment they need, and achieves sustained viral suppression, we can sharply reduce new infections.⁵ According to a recent report, nearly 40% of new HIV transmissions in 2016 came from people who didn't know they had HIV.⁶

Annual Report

January 1, 2021 – December 31, 2021

9 RTS in Connecticut

- Planned Parenthood of Southern CT (**Statewide**)
- Yale New Haven Hospital (**New Haven**)
- Cornell Scott Hill Health Center (**New Haven**)
- Southwest Community Health Center (**Bridgeport**)
- Community Health Center (**Statewide**)
- CT Children's Specialty Group (**Hartford**)
- StayWell Health Care (**Waterbury**)
- Connecticut Dept. of Correction (**Statewide**)
- Anchor Health Initiative (**Stamford, Hamden**)

75,587 individuals were HIV tested during the reporting period. **95** (.13%) were newly dx HIV cases. The percentage of people HIV tested by county were: **(43%)** New Haven, **(25%)** Fairfield, **(16%)** Hartford, **(7%)** New London, **(3%)** Middlesex, **(1%)** Tolland **(1%)** Windham and **(1%)** Litchfield.

Demographic Information

The percentage of individuals by Race/Ethnicity were **26%** Hispanic/Latinx, **28%** Black/AA, **34%** White, **4%** some other race, and **8%** unknown race.

55% of individuals HIV tested identified as a female, **35%** as male, **1%** as Transgender and **9%** as other gender or unknown gender.

35 years old was the average age (age range 13-98; mode: 30 yrs).

4. "HIV.gov: U.S. Statistics." U.S. Department of Health & Human Services, accessed November 14, 2019, <https://www.hiv.gov/hiv-basics/overview/data-and-trends/statistics>

5. "Selected National HIV Prevention and Care Outcomes in the US," Center for Disease Control and Prevention, accessed November 14, 2019, <https://www.cdc.gov/hiv/pdf/library/factsheets/cdc-hiv-national-hiv-care-outcomes.pdf>

6. "HIV Testing." Center for Disease Control and Prevention, accessed October 28, 2019, <https://www.cdc.gov/hiv/testing/index.html>

HIV Testing Positive Results

The RTS intervention identified **95** HIV newly diagnosed clients:

28 (29%) of them were Hispanic/Latinx, **44** (46%) were Black/AA, **20** (21%) were White and **3** (3%) were from some other race.

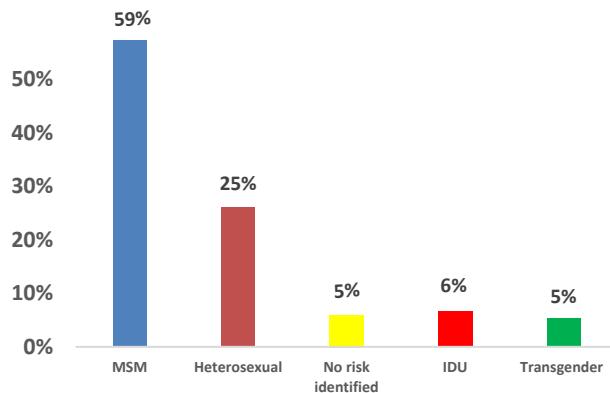
69 (73%) of them were male, **2** (22%) were female and **5** (5%) were transgender.

36 years old was the average age (age range 18-69; mode: 26 yrs).

HIV risk information was collected at the time of HIV diagnosis. More than **1 in 2** (59%) clients were men who have sex with men (MSM).

59%
of HIV newly
diagnosed
were among
MSM

Below is a chart that shows the breakdown of newly diagnosed HIV positives by HIV risk groups.



The percentage of HIV newly diagnosed individuals by county were: **(51%)** New Haven, **(26%)** Fairfield, **(15%)** Hartford, **(5%)** New London, and **(3%)** Litchfield. From 2020 to 2021, the number of RTS HIV newly diagnosed increased by **67%** (i.e., [n=57] in 2020 vs. [n=95] in 2021).

RTS Outcomes

Out of the 95 HIV newly diagnosed people, **94% (89)** were referred for medical care and attended 1st medical appointment within 30 days of test date; and **74%** (**70**) were interviewed by partner services within 30 days.