BHIVA national clinical audit 2018: monitoring of adults with HIV aged 50 or over

Data collection for BHIVA’s 2018 national clinical audit is now open until 15 June. The aim is to assess adherence to standards of care relating to monitoring of older adults with HIV, based on BHIVA guidelines for the routine investigation and monitoring of adult HIV-1-positive individuals 2016. The content of the audit will cover:

Auditable targets specified in the guidelines:

- Patients on ART should have a list of all current medication, or note that no medication other than ART is being taken, recorded within the past 15 months (97%)
- Patients on ART with HIV viral load measured within the last 9 months or within the last 15 months if taking a PI (90%)
- Patients aged >40 years with 10-year cardiovascular disease (CVD) risk calculated within the last 3 years if taking ART (90%).
- Patients with a smoking history documented in the last 2 years (90%) and blood pressure (BP) recorded in the last 15 months (90%)

Recording and management of poly-pharmacy and co-morbidities more generally.

How to participate

Services providing ongoing clinical care for adults with diagnosed HIV infection are invited to take part in the audit, which comprises a case-note review of adults aged 50 or over. The text of the questionnaire is attached in the annex below, to aid in preparation and data-gathering. After reviewing this, please participate as follows:

Check that you have your BHIVA audit site-code (a six-digit number). This is your “token”, which the software will ask you to enter in order to access the online questionnaires.

Please select the last 40 adults aged 50 or over who have attended your service for care for routine care of ongoing HIV-1 infection during 2017 and/or 2018, or all such individuals if fewer than 40. Please EXCLUDE:

- Individuals attending for non-routine/urgent care eg because of new symptoms
- Individuals with HIV-2 infection.

But please do include individuals attending for routine care on an irregular basis and/or without a booked appointment.

Complete the audit for each of these 40 patients by using the following link and entering your site-code as your token:


Please note that the software treats each patient separately. It does not link the forms together or recognise when 40 have been submitted. You do not need to submit all your data at the same time. Each individual form must be completed in one sitting without breaks.
which may cause the software to time out, but you can leave and come back between
patients.

For your own records: Immediately after submission, the software will give an option to
save/print the completed form. It is suggested that you do this for your own records, and
also that you note patients’ clinic numbers against the numbers you have entered on the
form. To download a completed form you need to click the “print” link before selecting any
other link, eg before returning to the start to enter data for a different patient.

Rapid results: After your service has submitted case-note data for 40 patients, or all eligible
individuals if fewer, you may request a summary of your site’s outcomes against the
auditable targets specified in the guidelines. We will aim to send this within 1-2 working
days, although this is not guaranteed. Later, after national results have been presented at
the 2018 autumn conference, fuller individual reports will be provided to participating
services, comparing their results with national data and providing recommendations for
improving quality of care.

Follow-up: The BHIVA Audit and Standards Sub-Committee has agreed to follow up national
audits. This means we will contact some or all participating services at a later date, to ask
about quality improvement activity resulting from the audit.

Queries
Please contact BHIVA’s audit co-ordinator Hilary Curtis, hilary@regordane.net 07984 239556, for
any queries relating to participation in the audit or use of the online software.
Annex: Questionnaire text

Patient characteristics
Please assign a number for this patient, from 1 to 40, to make it easier to identify the record in case of any query about the data.
Please keep a list of patients entered in the audit for your own records, matching the number you've entered here to the patient's clinic number or bar-code sticker.

Gender:
Please choose only one of the following: Male / Female / Trans

Age in years:
Your answer must be at least 50

Only an integer value may be entered in this field. Please write your answer here:

HIV exposure:
Please choose only one of the following: MSM / Heterosexual / Injecting drug use (IDU) / Other / Not known

Ethnicity:
Please choose only one of the following:

- A White British
- B White Irish
- C Any other White background
- D White and Black Caribbean
- E White and Black African
- F White and Asian
- G Any other mixed background
- H Indian
- J Pakistani
- K Bangladeshi
- L Any other Asian background
- M Black or Black British Caribbean
- N Black or Black British African
- P Any other Black background
- R Chinese
- S Any other ethnic group
- Z Not stated

Letters shown are standard ONS/NHS codes.

Date patient last seen and reviewed by a clinician (ie not just blood test):
Please enter a date:

Only patients seen for care during 2017 and/or 2018 are eligible for inclusion in this audit.
NB: All dates must be recorded as dd/mm/yyyy. Please take care as errors may affect your audit outcomes.

If the first time this patient was seen for HIV care in your clinic was on or after 1 January 2015, please enter this date. Otherwise leave blank.
Please enter a date:

At that time, was the patient:
Only answer this question if an answer was given to previous question.

Please choose only one of the following:

- Newly diagnosed with HIV
- Transferred care from another clinical service
- Not newly diagnosed, but had previously not been receiving care

**HIV management**

**Most recent CD4 count in cells/mm³:**
Please choose only one of the following: <350 / 350-500 / >500

**Currently receiving anti-retroviral therapy (ART)?**
Please choose only one of the following: Yes / No

**Does regimen include a protease inhibitor (PI)?**
Only answer this question if receiving ART:
Please choose only one of the following: Yes / No

**Date HIV viral load (VL) last measured (dd/mm/yyyy):**
Only answer this question if receiving ART:
Please enter a date:
This is a key audit outcome so please check your answer to this question carefully. Leave blank only if not recorded within past three years.

**Date information about adherence last measured (dd/mm/yyyy):**
Only answer this question if receiving ART:
Please enter a date:
Leave blank if no record within past three years.

**Medicines management**

**Date when a list of all current medication was last recorded, or date when it was last recorded that no medication other than ART is being taken (dd/mm/yyyy):**
Please enter a date:
This is a key audit outcome so please check your answer to this question carefully. Leave blank only if not recorded within past three years.
How many medications other than ART drugs is the patient currently receiving?
Only an integer value may be entered in this field. Please write your answer here:

Include both prescribed and over the counter medications, but not herbal or homeopathic remedies, vitamins or other dietary supplements. If none, enter 0. If unknown, please enter an estimate if possible, otherwise leave blank.

Has the summary care record (NHS data spine) been consulted to check information regarding prescribed medications?
Please choose only one of the following:

- Yes
- No
- Individual does not have a summary care record or has withheld consent to view it
- Not recorded
- Not applicable (eg non-England)

Is it documented that:
Only answer this question if receiving at least one non-ART medication.

- Potential for drug-drug interactions has been considered? Yes / Uncertain / No
- Pharmaco-kinetics have been reviewed? Yes / Uncertain / No

Has it been documented within the last 3 years that:

- Patient has been asked about over the counter/non-prescribed medication? Yes / Uncertain / No
- Patient has been asked about herbal or traditional remedies? Yes / Uncertain / No

Communication and shared care for co-morbidities

Is the patient registered with a GP?
Please choose only one of the following:

- Yes, and there is consent for the HIV clinic to communicate with the GP
- Yes, but the patient has withheld consent for the HIV clinic to communicate with the GP
- No
- Not recorded

Date of last communication from HIV clinic to GP:
Only answer this question if registered and consented for GP communication.

Please enter a date:

Leave blank if no record within past three years.

Date of last communication to HIV clinic from GP:
Only answer this question if registered and consented for GP communication.

Please enter a date:

Leave blank if no record within past three years.
Does the individual have any of the following co-morbidities:

- Hypertension
- Hyperlipidaemia
- Type 2 diabetes
- Cardio-vascular disease (CVD)
- Renal impairment
- Depression +/- anxiety (including self-reported)
- Osteoporosis
- Obesity

For each of above, choose one of the following:

- Yes, recent diagnosis (previous 6 months)
- Yes, long term
- No
- Unsure or record is unclear

Answer "Yes" if condition is present but controlled by medication, eg anti-hypertensive agents.

Please write in any other co-morbidities which are of current clinical relevance eg because recently diagnosed and/or not well-controlled by medication:
Please write your answer here:

Is the patient currently menopausal?
Only answer this question if female and age 50-56 years:

Please choose only one of the following: Yes / No / Not recorded

Has there been communication from the HIV clinical service to the GP about the management of recently diagnosed or active comorbidity(ies), including highlighting the potential for drug interactions?
Only answer this question if individual has recently diagnosed or active co-morbidities.

Please choose only one of the following: Yes / No / Not sure

Has there been a response from the GP?
Only answer this question if HIV clinical service has communicated with GP about recently diagnosed or active co-morbidities.

Please choose only one of the following: Yes / No / Not sure

If you would like to comment further about communication and management of the patient’s co-morbidity(ies), please do so here:
Only answer this question if individual has recently diagnosed or active co-morbidities.

Please write your answer here:
Monitoring

Date 10 year CVD risk last calculated:
Only answer this question if individual does not have CVD.

Please enter a date:

This is a key audit outcome so please check your answer to this question carefully. Leave blank only if not recorded within past three years.

Date last asked about smoking:
Please enter a date:

This is a key audit outcome so please check your answer to this question carefully. Leave blank only if not recorded within past three years.

Smoking status:
Please choose only one of the following: Current smoker / Ex-smoker / Never smoker / Not recorded

Within the last three years, has the patient been offered:
Only answer this question if current smoker.

- Advice about risks of smoking: Yes / Uncertain / No
- Smoking cessation service/support: Yes / Uncertain / No

Is the patient actively co-infected with:

- Hepatitis B: Yes / No / Not recorded
- Hepatitis C: Yes / No / Not recorded

If patient has cleared/past but not current infection, please answer "no".

Does the patient have cirrhosis on the basis of biopsy, imaging or fibroscan?
Only answer this question if actively co-infected with hepatitis B and/or C.

Please choose only one of the following: Yes / No / Not recorded

Date liver ultrasound last performed:
Only answer this question if actively co-infected with hepatitis B, or actively co-infected with hepatitis C and has cirrhosis.

Please enter a date:

Leave blank if no record within past three years.

Date last asked about mood/mental health:

Date last asked about memory and/or cognition:

Date last asked about recreational drugs:

Date blood pressure last recorded: - This is a key audit outcome so please check your answer to this question carefully. Leave blank only if not recorded within past three years.
Date weight or body mass index (BMI) last recorded:

Date random glucose or HbA1c last checked:

Date random lipid profile last assessed:

Date urinalysis last done or urine protein/creatinine ratio measured:

Date fracture risk last assessed (FRAX or DEXA):

Date sexual health screen last offered:

Date sexual partner(s) and possible partner notification last discussed:

Date cervical cytology last done, or last recorded advice to request this eg from GP: - Only answer if female and age 65 or under.

For each of the above dates, leave blank if no record within past three years.

Has the patient received influenza vaccine during Autumn/Winter 2017 (ie most recent season)?  
Please choose only one of the following:

- It is recorded that the patient received flu vaccine
- It is recorded that the patient was advised/reminded to request flu vaccine from eg GP/pharmacy
- It is recorded that the patient did not receive flu vaccine
- Not recorded

Has the patient received pneumococcus vaccine (ever)?  
Please choose only one of the following: Yes / No / Not recorded