



## **Frequently Asked Questions (FAQs) about Community-Based Testing Services for HIV, Sexually Transmitted Infections and Hepatitis C**

**September 16, 2020**

The following FAQ was developed by the San Francisco Department of Public Health for use by local facilities and will be posted at <http://www.sfcddcp.org>. Information may change.

**BACKGROUND:** Essential appointments and ambulatory care services are defined in the August 15 [Stay-Safer-At-Home Order C19-07g](#), [Health Officer Order No. C19-08b](#) ("Medical Care Order") Section 15, and the June 16 [Directive of the Health Officer No 2020-20](#) ("Ambulatory Care Directive").

Community based testing for prevention and care of HIV, sexually transmitted infections and hepatitis C are considered essential services and are permitted as long as they follow the pertinent Health Officer Orders and Directives.

**AUDIENCE:** Clinical and non-clinical personnel of community-based organizations and programs providing testing and ambulatory care services to prevent, treat and monitor HIV, sexually transmitted infections and hepatitis C.

### **Essential Testing & Services**

#### **During the COVID-19 pandemic, under what conditions can community-based organizations and programs provide services to prevent, treat, and monitor HIV, sexually transmitted infections, and hepatitis C?**

The June 16 [Directive of the Health Officer No 2020-20](#) ("Ambulatory Care Directive") gives specific guidance and Best Practices for how ambulatory care services are allowed to be provided under the Stay-Safer-at-Home Order C19-07 and the Medical Care Order C19-08 during the COVID-19 pandemic in San Francisco. See [SF Health Orders](#) page and [SF Health Directives](#) page.

Care may be provided by community-based organizations and programs under the Ambulatory Care Directive as long as all mandatory Best Practices are followed, and a Health and Safety Plan checklist is completed. The Ambulatory Care Directive allows services to be provided by licensed clinical personnel, or by non-clinical personnel supervised by such licensed professionals.

#### **What services are considered essential?**

The Medical Care Order defines an "essential" appointment as one that, in the judgment of the provider, "cannot be delayed or postponed without reasonably foreseeable negative medical or health impact." The Ambulatory Care Directive, Appendix A, states that ambulatory care providers should "prioritize care for those who would benefit the most" including "patients with communicable diseases of public health importance, including HIV, tuberculosis, and sexually transmitted infections (STIs)."

**Therefore, ambulatory services for testing, prevention, treatment, and monitoring of HIV, STIs, and hepatitis C are considered essential and should be prioritized.**



**What specific aspects of HIV, STI, and hepatitis C services does SFPDH recommend community-based organizations and programs pursue?**

**HIV treatment:**

- Support patients to achieve and maintain an undetectable viral load to prevent illness related to both HIV and COVID-19. See interim [U.S. guidance](#) on COVID-19 and people with HIV.
- Inform people with HIV that there is no evidence that they are at greater risk of severe COVID-19 unless they are immunocompromised (such as having a low CD4 count).
- When possible, use telephone or video conferences to ensure continuity of care for HIV primary care, case management, and mental health and substance use services. In person visits are permissible, when needed.
- Offer immediate treatment to patients with newly reactive HIV test results or who are previously diagnosed and treatment-naïve.
- Advise patients who are doing well on their ART regimen to request a 90-day supply of antiretroviral (ARV) drugs and other medications, and to consider changing to mail order delivery of medications when possible.
- Advise patients that they should have their HIV viral load checked at least once every 6 months to ensure they remain undetectable.
- Share any barriers to providing services with insurers or government funders. Many funders are relaxing certain contractual obligations during the pandemic.

**Emergency PEP to Prevent HIV:**

- Inform patients that they can initiate HIV post-exposure prophylaxis (PEP) without a visit to an emergency room or clinic by calling **San Francisco City Clinic** at (415) 487-5500.

**PrEP to Prevent HIV:**

- Pre-exposure prophylaxis (PrEP) is available to prevent HIV.
- Use telephone or video conference to discuss PrEP
- Patient will need to have blood drawn for initial creatinine testing, and can get HIV and syphilis testing at the same time. Swabs for STI screening can be self-collected, as noted below.
- In place of scheduled follow-up testing, considering offering home HIV and STI testing for follow-up.

**STI Screening:**

- As clinics restore in-person care, they may consider resuming routine screening for STIs.
- Prioritize routine STI screening for patients at highest risk and from populations with the highest disease burden, including young women and men who have sex with men.

**STI Treatment:**

- In-person clinical evaluation is preferred for patients who report symptoms consistent with



an STI.

- [If in-person clinical evaluation is not feasible](#), manage patients by telephone or video conference based on reported symptoms or exposure.
- Treat people who are or may become pregnant and who were infected or sexually exposed to syphilis with injectable benzathine penicillin G to prevent congenital syphilis infection.
- Health care providers may provide expedited partner therapy for gonorrhea, chlamydia and trichomonas using a [shared clinical decision-making process](#) with their patients.

**HCV screening:**

- Screening of all adults, including those without symptoms, is recommended at least once in a lifetime, as it enables earlier diagnosis and treatment.
- Community-based HCV testing is available in San Francisco for those who are at risk of hepatitis C and may not be connected to medical care. These risk groups include people who have ever injected drugs, people who smoke stimulants, MSM on PrEP, and transgender women.
- People with chronic liver disease, including hepatitis B and hepatitis C, might be at higher risk for severe illness from COVID-19, particularly if the underlying medical conditions are not well controlled.
- CDC offers COVID-19 guidance for some of the groups at risk for viral hepatitis or severe illness from viral hepatitis, including people with [HIV](#) and people experiencing [unsheltered homelessness](#).

**HCV treatment:** Access to treatment is available by private health insurers and public health programs like the VA Medical Centers, the AIDS Drug Assistance Program, Medicaid, and MediCal.

- Encourage patients to continue treatment and follow the advice of their healthcare provider. This is the best way to keep their immune system healthy.

## Safer Procedures & Mitigation Measures

**What resources does SFPDH recommend as community-based organizations update their SOPs and protocols to ensure that specimen collection procedures are done as safely as possible for both staff and clients?**

Providers can take the following steps to prevent and mitigate transmission of COVID-19:

- Provide services by telephone or video conference when possible.
- Encourage the use of mail-order pharmacies or pharmacies that offer home delivery.
- Remind patients to avoid close contact (including sex) with anyone outside their household, when possible.
- Share [Tip Sheet for Safer Sex During the COVID-19 Pandemic](#) with patients
- Follow SFPDH's updated guidance on COVID-19 for providers and the general public (see [www.sfcdp.org/covid19](http://www.sfcdp.org/covid19) and [www.sfcdp.org/covid19hcp](http://www.sfcdp.org/covid19hcp) for relevant documents)



- Review this [Interim Framework During the COVID-19 Pandemic for PPE Use by City and County of San Francisco \(CCSF\) and Contractor Health Care Personnel Working in a CCSF-operated Outpatient Clinic Setting](#) and updated guidance on [Eye Protection for Healthcare Personnel](#)
- Follow all provisions of the Medical Care Order and Ambulatory Care Directive (referenced above)

Below are links to resources offering additional guidance for how to do STI and HIV testing procedures more safely:

- San Francisco City Clinic: STD Self-Collection
  - [How to collect a rectal \(butt\) swab](#) (video)
  - [How to collect a throat swab](#) (video)
  - [How to collect a urine \(pee\) sample](#) (video)
- [Minnesota Department of Public Health: HIV Testing & Social Distancing](#)

Helpful practical tips on how to perform HIV and STI testing using modified techniques, including:

  - HIV risk assessment and consent changes
  - Options for client self-swabbing onsite or in outreach settings
  - Other ways to social distance with oral self-swabs – testing indoors/testing outdoors
  - OraQuick oral swab reminders
- National Coalition of STD Directors
  - [Sex & COVID-19](#)
  - [COVID-19 STD Clinic Resources](#)
- Centers for Disease Control & Prevention
  - [CDC Guidance for Blood and Plasma Facilities: Interim Infection Control Guidance on COVID-19 for Personnel at Blood and Plasma Collection Facilities](#)
  - [CDC COVID-19 Infection Control and PPE Guidelines](#)
  - [CDC COVID-19 Healthcare Professionals: Frequently Asked Questions and Answers](#) – Includes information related to transmission and waste management.

### **What if a community-based organization is not able to offer any or all of the testing services right now, due to space or staffing constraints?**

Ideally all of the pre-pandemic HIV, hepatitis C, and STI testing would be available; however, this is a challenging time as clients may be seeking testing but some programs may not be able to offer services at full capacity given social distancing constraints, availability of Personal Protective Equipment, staffing capacity, and other factors.

Providers will need to prioritize the scheduling of services. When prioritizing care, providers should consider the risk of population being served to minimize patient or client negative outcomes.

In-person care has different kinds of risks associated with the nature of the care being provided. Providers



will need to assess the level of risk for every service provided and the level of protection required for each by using the protocol listed in Appendix A, Section 3 of **Best Practices for the Provision of Ambulatory Care, Including Counseling and Other Healing Arts** in the [Directive of the Health Officer No 2020-20](#) (issued 6/16/20).

**Are the safety and mitigation procedures any different for providing mobile services (e.g. mobile van) rather than in a clinic setting?**

Mobile services are required to operate with all applicable Health and Safety provisions of the Medical Care Order and the Ambulatory Care Directive, recognizing that some provisions might not apply to a mobile setting, and should also take into account the Safer Procedures and Mitigation Measures described in this section.

**How can clients continue to have a healthy sex life in the COVID-19 era?**

Sex is a normal part of life for many people, and it also qualifies as “close contact” that could put a client and their partners at risk of getting and spreading COVID-19. To stay safest, the San Francisco Department of Public Health recommends avoiding close contact - including sex - with anyone outside of the household or a small, stable social group.

For more information on sex in the time of COVID-19, see [COVID-19 and Sexual Health](#).

## Resources

Stay informed. Information is changing rapidly.

- San Francisco Department of Public Health (SFDPH): <https://www.sfcddp.org/covid19>
- The National Clinician Consultation Center - <https://nccc.ucsf.edu/>
  - [COVID-19: Evidence-Based Clinical Guidance for a Rapidly-Evolving Situation](#) - clinical consultation for healthcare providers on HIV and HCV management, prevention of bloodborne pathogen transmission, and substance use disorder treatment during the COVID-19 pandemic.
  - [HIV/AIDS Management](#)
- SF City Clinic Referrals and Local Resources
  - <https://www.sfcityclinic.org/patient-education-resources/referralslocalresources>
  - SF City Clinic COVID-19 FAQ: <https://www.sfcityclinic.org/covid-19-faq>
- Centers for Disease and Control and Prevention: HIV Risk and Prevention – PrEP
  - <https://www.cdc.gov/hiv/risk/prep/index.html>
- San Francisco Health Network: Assistance with mental health and substance abuse
  - <https://sfhealthnetwork.org/about-sfhn/mental-health-crisis/>
- NYC Health Guidance: [Maintaining HIV and STI Services during COVID-19](#)