



## Conducting Risk Assessments and Delivering Individualized Prevention Plans

Clinicians have a responsibility to their patients to do no harm. Part of that responsibility involves keeping patients safe, and part of it involves keeping the population safe. Clinical providers who understand this concept are better prepared to create a sense of shared responsibility and decision making with their patients.

Clinicians may evaluate individual and community risk factors by conducting a comprehensive risk assessment with their patients. This will help these clinicians to deliver the most effective prevention plans- ones that are tailored to the individual patients.

### First Steps:

- Take inventory of personal biases surrounding sexual health to better understand one’s own comfort levels in discussing sensitive topics:
- Create a “no judgment zone”
  - Be comfortable discussing all topics
  - Build a trusting relationship with patients
  - Communicate in a manner that does not stigmatize or negatively judge patients’ gender identity, sexual orientation, sexual behaviors, drug-use behaviors, or medical or social characteristics.
- Be familiar with (and help patients to become familiar with) social and structural determinants of health that influence the use of HIV prevention and care services:
  - Real or perceived alienation, discrimination, or stigma due to sexual orientation or practices, drug use, or HIV status (essential for work in prevention with positives)
  - Behaviors that can increase the risk of HIV transmission, e.g. exchanging sex for money, housing and/or drugs
  - Poverty, unemployment, food insecurity, or unstable housing
  - Limited access to affordable health care
  - Limited education and health literacy
  - Recreational substance and alcohol use and dependence

### KEY POINT



To optimize success it is important to implement clinic wide protocols that guarantee that all patients have a risk assessment initiated at intake.

## AMBASSADOR AT A GLANCE

Antonina G. Foster, NP, MSN, MPH, received her bachelor’s degree in nursing from Tuskegee University in 1998 and her master’s degree in public health and in science in nursing from the University of Alabama Birmingham in 2001. She is currently in pursuit of her doctoral degree in nursing practice, with a focus on population health and the role of clinicians in HIV prevention. She is certified by the National Certification Corporation as a Women’s Health Nurse Practitioner and has practiced in the areas of perinatology, endocrinology and STD management and research. Ms. Foster is currently the lead clinician on multiple HIV/AIDS research projects with Emory University School of Medicine including the Women’s Interagency HIV Study. Ms. Foster has always had a passion for population health, particularly as it relates to the closure of the healthcare gap in disparate populations. Her interest in HIV treatment and prevention stems in part from the disproportionate effect HIV has on African American women.



## Conducting Risk Assessments:

Recommended topics to cover during a risk assessment include the following:

- Sexual practices: vaginal, penile, anal, or oral sex; insertive versus receptive sex
- Sex partners: number, age, gender, HIV status, drug use history, and recent STD diagnoses of partners; whether a partner is new or committed; where partners met; intimate partner violence
- Sexual activity that includes exposure to blood
- Alcohol and drug use behaviors: history and recent use of substances, use of substances before, during, or after sexual activity, overuse of prescribed medications, sharing of drug equipment, drug-injection partners, and use of new sterile syringes
- History of STDs: treatment, recurrent symptoms, referral and treatment of partner(s), testing frequency, and knowledge about/access to STD testing facilities
- History of and recent condom use: male/female condom, resistance, and barriers to condom negotiation (abuse or intimidation)
- HIV status, including factors that may influence infectiousness or the risk of HIV transmission (e.g. ART use, recent diagnosis of a STD, condom use, contraceptive use, use of PrEP by partner)

## Important Considerations When Implementing Risk Assessments:

- Develop written procedures about staff members' responsibilities for providing risk assessments and risk-reduction interventions
  - Put protocols in place to guarantee that all patients have risk assessments at intake (includes prevention with positives)
- Provide training and do not assume that a title (e.g. RN, MD, LCMSW) means someone is trained and knowledgeable about conducting risk assessments and delivering individualized prevention plans
  - Unique and challenging situations may occur and only with proper training will a facilitator feel confident in handling these cases
- Risk assessments and prevention plans may be completed in one visit or delivered over a series of visits.

### CAI OFFERS FREE TRAININGS IN THIS AREA!

- Cultural Competency
- Developing Skills in Behavioral Risk Screening
- Using a Client Diagnostic Questionnaire
- Improving Adherence, Retention and Engagement by Using Best Practices
- Asking tough Questions: How to Take a Comprehensive Sexual History

### FOR MORE INFORMATION

To learn more about the ambassador program, materials discussed, and capacity building offered at no cost please visit our website at [www.HIVCBACenter.org](http://www.HIVCBACenter.org)

### Works Cited

Dreisbach, S., Burnside, H., Hsu, K., Smock, L., Coury-Doniger, P., Hall, C., & ... Thrun, M. (2014). Improving HIV/STD Prevention in the Care of Persons Living with HIV Through a National Training Program. *AIDS Patient Care & Stds*, 28(1), 15-21. doi:10.1089/apc.2013.0094

Incorporating HIV prevention into the medical care of persons with HIV: recommendations of CDC, the Health Resources and Services Administration, the National Institutes of Health, and the HIV Medicine Association of the Infectious Diseases Society of America. (2003). *MMWR: Morbidity & Mortality Weekly Report*, 52(RR-12), 1.