







Public Health Agency of Canada

Agence de la santé publique du Canada



Using a Virtual Classroom Model to Build HIV Treatment Capacity in Saskatchewan:
Continued success during the ongoing COVID-19 pandemic

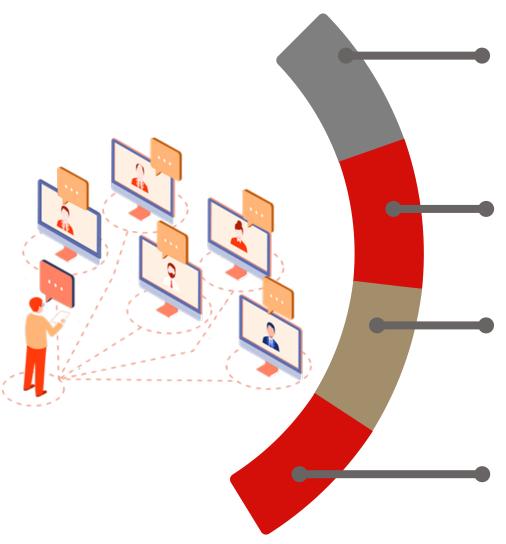
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Approach







HIV VIRTUAL CLASSROOM (VC)

The VC was launched in 2018 by the Saskatchewan Infectious Disease Care Network (SIDCN) as an online, small-group platform. It delivers live and interactive HIV medical education to Saskatchewan health care providers.

UNIQUE EDUCATION MODEL

HIV VC presentations are facilitated by local infectious disease care specialists and HIV experienced physicians. They use Saskatchewan-specific content.

IMPACT OF COVID-19

During the pandemic, interest for the HIV VC has grown. Five sessions were offered, with two more than originally planned between April 1, 2020 - March 31, 2021 to 47 primary care providers.

EVALUATION

A post-evaluation survey was developed and sent by e-mail. The survey was modified slightly when administered to the last four cohorts.

www.sidcn.ca

Results





28 surveys (55% response rate) were collected from the 5 sessions in 2020-21

What participants learnt by attending the HIV VC

100% Learnt:

- ✓ Approaches to first visits following an HIV diagnosis
- ✓ How to assess readiness to begin
 ARV treatment
- ✓ Issues to consider when starting ARV treatment
- ✓ How to identify & refer complicated patients to an HIV specialist
- ✓ Various methods of HIV prevention and how to counsel on it

96% Learnt:

- ✓ How to order an HIV test
- ✓ Which tests to order for early visits
- ✓ How to counsel patients on medication adherence
- ✓ Approaches to long-term HIV management
- ✓ Strategies for providing non-judgmental & stigma-free HIV primary care



Results









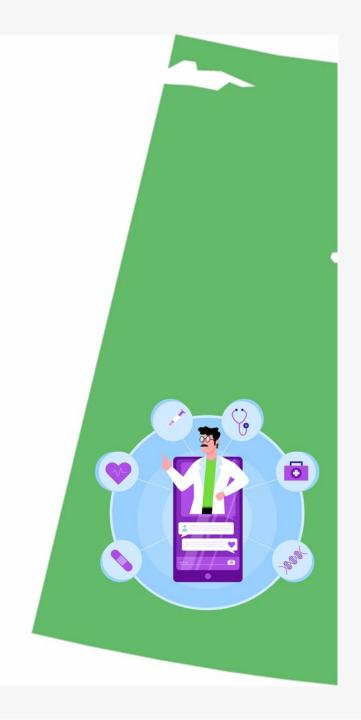
By delivering HIV medical education to 47 primary care providers in 19 different communities, the VC increased the capacity to test, treat, and manage HIV patient care in Saskatchewan.



Using a scale of 1-10 (pre and post attendance), all 24 participants surveyed from the last four sessions reported an average 3.68 point increase in confidence providing HIV primary care.



A third (10/30) of HIV VC graduates who were eligible became approved ARV prescribers in Saskatchewan and are able to initiate HIV treatment in 8 different communities.







Conclusion

These findings suggest that the HIV Virtual Classroom continues to be a promising and effective model for educating primary care providers and enrolling new ARV prescribers in Saskatchewan, even with an ongoing global pandemic.

Based on the success of the HIV Virtual Classroom, a HCV Virtual Classroom was created and launched by SIDCN in October 2020.

Questions?

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