



Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe

Report on Consensus set of indicators to assess the impact of the European Testing Week

DOCUMENT IDENTIFIER:	D6.1
DUE DATE:	31.10.2019
DELIVERY DATE:	31.10.2019
CLASSIFICATION:	Public
EDITORS:	Lauren, COMBS (CHIP/RegionH) Laura, Fernàndez-Lopez (ICO-CEEISCAT)



Co-funded by
the Health Programme
of the European Union

Co-funded by
the 3rd Health Programme
of the European Union under Grant
Agreement n° 761319

This Joint Action was co-funded by the 3rd Health Programme of the European Union under grant agreement no 761319.

Authors

Lauren Combs (CHIP/RegionH, DK) and Laura, Fernández-Lopez (ICO-CEEISCAT, Spain)

Acknowledgements

The INTEGRATE Joint Action would like to thank the European Testing Week Working group for their contribution to the preparation of this document.

Suggested citation: INTEGRATE project. D6.1 Consensus set of indicators to assess the impact of the European Testing Week; 2019.

1. Introduction

The objective of WP6 Objective 1 is to improve monitoring and evaluation of integrated testing by examining and adapting existing surveillance tools (including the COBATEST tool and European Testing Week evaluation survey) in order to measure the impact of European Testing Week. European Testing Week was started in 2013 by the HIV in Europe initiative (now known as EuroTEST) as a way to create a united European effort to raise awareness on the benefits of earlier testing for HIV. Recognising the overlaps in the key affected populations and transmission routes, in 2015, European Testing Week (ETW) added hepatitis B (HBV) and C (HCV) as additional key focus areas. ETW is guided by a Working Group (WG) comprising of members representing different types of organisations from public institutions, health care and community settings.

Since its initiation, after every ETW, an online survey is disseminated to all signed-up participants to provide feedback and evaluate the overall impact of the initiative. Participants are also asked to submit aggregated testing data if they engaged in testing activities. Results from the survey, submitted testing data and data collected from online activities are collected and analysed to develop an evaluation report for each ETW. These reports are shared publicly and available for all stakeholders to review.

To improve surveillance of the impact of ETW, especially integrated testing implementation during the week, the ETW indicators were reviewed, adapted and piloted through activities in WP5 and WP6.

2. ETW indicators

ETW indicators since the initiation of ETW in 2013 were reviewed. Since 2013, questions in the survey collected information on:

- Background information (location, type of organisation etc.)
- Types of activities conducted for ETW (testing for HIV/HBV/HCV, advocacy, awareness raising, etc)
- Targeted key groups for ETW
- Details on their activities
 - For testing: types of tests, estimated percentage increase in testing, linkage to care and referral
 - Type of awareness raising activities
 - Collaborations
- Usage of social media for ETW
- Satisfaction with the initiative
- Barriers or challenges experienced

However, feedback after the initial survey reported that the survey was too long, and efforts were made within the WG to shorten the length of the survey the following year. From 2015-2017, each year the WG reviews the survey questions from the previous year and examines how its impact is measured in the evaluation report. Each question is discussed and decided whether it should be included in the evaluation report as a way to shorten the length of the survey and ensure that the indicators collected measure relevant outcomes.

In addition to the online survey, participants are asked to submit aggregated testing data if they conducted testing activities for ETW. Data on testing is collected during the weeks preceding ETW, during ETW and a few weeks after ETW to measure differences in testing rates. Data is entered into an Excel form and emailed to the ETW secretariat where all submitted data is consolidated into one database and analysed.

3. WP5.1 Spring European Testing Week pilot

In 2018, ETW piloted its first Spring ETW from 18-25 May in collaboration with partners in WP5.1 and the European Liver Patients' Association. The main aim of the Spring ETW pilot was the same as the autumn ETW, to increase awareness and access to HIV and hepatitis testing, but with the added aims to:

1. Provide another opportunity during the year to promote testing and increase awareness of knowing one's hepatitis/HIV status
2. Focus on integrated testing activities for hepatitis and HIV with the aim of understanding how we can improve and address barriers
3. Assess interest and the feasibility of having more than one ETW during the year

In order to measure the impact of the pilot, the ETW survey indicators were reviewed through activities in WP6, led by lead partner (ICO-CEEISCAT). Since this was the first Spring ETW pilot, the version of the evaluation survey could not be used to evaluate the pilot since the indicators were measuring different outcomes. In WP6, the ETW survey evaluation was edited to cut down on length and only include relevant indicators related to the Spring pilot. The questions were also compared with the indicators collected through the COBATEST surveillance network to ensure relevancy and compatibility with other surveillance systems. Learning from the experiences through COBATEST, a new component was added to the ETW survey where respondents were given the option to submit testing data (conducted during ETW) within the online survey providing an all-inclusive data collection form allowing for easier completion and submission of testing data. Whereas during previous evaluations, testing data could only be submitted through a separate Excel form which had to be downloaded from the ETW website and emailed to the ETW secretariat.

The new version of the survey was disseminated to all participating partners, including participating WP5.1 pilot sites. The new version of the survey yielded a high response rate and was able to showcase overall positive feedback on the Spring pilot, leading to the fixed establishment of both a Spring and Autumn ETW.

4. Applying lessons learned from Spring ETW pilot

To further improve surveillance of the ETW, lessons learned from the Spring ETW pilot were applied to the November 2018 ETW, where the same process was undertaken with close collaboration with WP6 lead partner (ICO-CEEISCAT). All survey questions, from the 2017 November ETW and Spring 2018 ETW surveys, were examined for relevance, impact and usage in the evaluation report. New questions were added to better measure impact of ETW activities, including questions on the organisation's regular services and the new inclusion of other targeted key groups (e.g. transgender people and partners of key populations) and other targeted conditions (e.g. syphilis, gonorrhoea, chlamydia and tuberculosis). Additionally, through the experiences learned from the Spring pilot survey, testing data could be submitted through three new methods:

1. Through an Excel spreadsheet (provided in both English and Russian and was embedded as a downloadable Excel form in the actual survey)
2. Through the online survey (questions were included for the week before, during and after ETW)
3. Through own data collection method (respondents could submit data through their own preferred method to the secretariat)

Although the survey was optimised, there was a low response rate and the survey length again was mentioned as being too long.

5. Identification of “core indicators”

During the annual ETW WG face-to-face meeting in 2019, in order to account for the low response rate and evaluation fatigue, for the 2019 Spring ETW, a new survey format was proposed. It was agreed to look at the full survey and see which sections were most relevant and then shorten the length of the survey to the minimum or core questions for collection. The survey should be focused with main core questions presented first (part one) and then the rest would be optional (part two) (Appendix A). No question should be obligatory to complete and partial answers should be accepted.

Through collaboration with WP6 lead partner (ICO-CEEISCAT), 11 core questions were identified as key indicators to measure the impact of ETW (Appendix B). The new format of the survey indicated that ‘PART ONE’ included core questions that measured the main elements of ETW. If the respondent had limited time to complete the survey, they were asked, at minimum, to complete ‘PART ONE.’ ‘PART TWO’ included additional questions to evaluate the overall success of the initiative and where respondents could provide more details about their activities. The survey was disseminated to the participating ETW organisations and yielded an increase in response rate from 32% for the pilot Spring ETW to 36%.

6. Next steps

The ETW WG has favoured the new format with the two sections, however, has also recommended that the questions be further scrutinised and measured to significantly reduce the length of the survey. WP5.1 partners participating in forthcoming ETWs (in November 2019 and May 2020) will continue to pilot the indicators to assess the impact of ETW. Additionally, discussions have been made on how its impact is currently measured and if this method is the way moving forward with the initiative. More in depth discussions are planned to see how the current ETW survey and surveillance of the initiative can be better optimised.

Appendix A. Indicators for ETW impacts evaluation

Areas for evaluation:

“Core”

- Geographical expansion
 - Number of sites participating (in the ETW and in the Evaluation)
 - Number of countries represented
- Type of organization
 - Number of organizations per type
- Type of testing setting
 - Number of sites per testing setting type
- Type of activities performed
 - Average number of different type of activities performed during ETW (per centre)
- Testing activities
 - Number (and %) of sites performing testing activities
- Target populations
 - Average number of target populations during ETW activities (per centre)
- Conditions inclusion in the centres activities
 - Average number of conditions focused during ETW (per centre)
- Combined testing
 - % of sites performing testing for more than one condition
- Diseases diagnoses (by condition)
 - Increase in tests performed
 - Average number of tests performed per site
 - Average increase in tests performed during ETW compared to an average week (Comparison tests performed the week before/ ETW/ week after)
 - Reactive tests detected
 - Average reactivity rate per site
 - Average increase in reactivity rate during ETW compared to an average week (Comparison reactivity rate the week before/ ETW/ week after)
 - Linkage to care
 - Average % of people with a reactive tests linked to care (or to confirmation)

“Supplementary”

- Use of European HIV test finder
 - % of participating sites that have heard about European Test Finder
 - % of participating sites where someone who accessed their services founded the service through European Test Finder
- Impact on service’s practices
 - % of participating sites that consider adding new practices or revising current practices in their organization after the ETW
- Interest in ETW
 - % of participating sites who would be interested in participate again
- Use of ETW materials
 - % of participating sites that have developed their own material for the ETW

Appendix B. Core Indicators

Evaluation area	Indicator	Construction of the indicator	Data source	Type of indicator
Geographical expansion	Number of sites participating (in the ETW and in the Evaluation)	Number of sites that signed and have responded the evaluation survey	Evaluation survey; list of signatures in the ETW Website	output
	Number of countries represented (in the ETW and in the Evaluation)	Number of different countries represented by all the organizations that have signed and have responded the evaluation survey	Evaluation survey; list of signatures in the ETW Website	output
Type of organization	Number of organizations per setting type	Number of organizations per each setting type	Evaluation survey (question 1)	output
Type of testing setting	Number of sites per testing setting type	Number of sites per each testing setting type	Evaluation survey (question 7)	output
Type of activities performed	Average number of different type of activities performed during ETW (per centre)	N: Summation of the number of different type of activities performed during ETW in each centre D: number of sites participating	Evaluation survey (question 5)	output
	Number of sites per type of activity	Number of sites per each type of activity	Evaluation survey (question 5)	output
Testing activities	Number of sites performing testing activities	Number of sites performing testing activities	Evaluation survey (question 5)	output
	% of participating sites performing testing activities	N: Number of sites performing testing activities D: Number of participating sites	Evaluation survey (question 5)	output
Target populations	Average number of target populations during ETW activities (per centre)	N: Summation of the number of different target populations attended during ETW in each centre D: number of sites participating	Evaluation survey (question 3)	output
	Number of sites per type of target population	Number of sites per each type of target population	Evaluation survey (question 3)	output
Conditions inclusion in the centres activities	Average number of conditions focused during ETW (per centre)	N: Summation of the number of different conditions focused during ETW in each centre D: number of sites participating	Evaluation survey (question 4)	output
	Average increase in the number of conditions tested for during ETW compared to the regular services	N: Summation of the increase in the number of conditions tested for during ETW compared to the regular services in each centre D: number of sites performing testing activities	Evaluation survey (question 4 and 12)	outcome



Combined testing	% of sites performing testing for more than one condition	N: Number of sites performing testing for more than one condition D: Number of sites performing testing activities	Evaluation survey (question 8)	output
Tests performed (by condition)	Average number of tests performed per site during ETW	N: Summation of the number of tests performed during ETW in each centre D: number of sites performing testing activities	Evaluation survey (question 8)	outcome
	Average increase in tests performed during ETW compared to an average week (Comparison tests performed the week before/ ETW/ week after)	N: Summation of the percentage of increase in tests performed during ETW compared to an average week in each centre D: number of sites performing testing activities	Evaluation survey (question 8)	outcome
	Average of the approximate increase (rough estimate) in tests performed during ETW compared to an average week	N: Summation of the percentage of increase in tests performed during ETW compared to an average week in each centre D: number of sites performing testing activities	Evaluation survey (question 9)	outcome
Reactivity rate (by condition)	Average reactivity rate per site	N: Summation of the reactivity rate during ETW in each centre D: number of sites performing testing activities	Evaluation survey (question 8)	output
	Average increase in reactivity rate during ETW compared to an average week (Comparison reactivity rate the week before/ ETW/ week after)	N: Summation of the increase in the reactivity rate during ETW compared to an average week in each centre (Comparison reactivity rate the week before/ ETW/ week after) D: number of sites performing testing activities	Evaluation survey (question 8)	outcome
Linkage to care	Average % of people with a reactive tests linked to care (or to confirmation)	N: Summation of the percentage of people with a reactive test linked to care during ETW in each centre D: number of sites performing testing activities	Evaluation survey (question 8)	outcome

Consortium

Croatia			
	HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO	Hrvatski zavod za javno zdravstvo	Croatian Institute of Public Health
	LET UDRUŽENJE ZA UNAPREĐENJE KVALITETE ŽIVOTENJA	Life Quality Improvement Association	
	HUHIVA HRVATSKA UDRUGA ZA HIV I VIRALNE HEPATITISE	Croatian association for HIV and viral hepatitis	
	ISKORAK		ISKORAK
Denmark			
	chip Center of Excellence for Health, Immunity and Infections	Region Hovedstaden / CHIP	
Estonia			
	Tervise Arengu Instituut National Institute for Health Development	Tervise Arengu Instituut National Institute for Health Development	
Greece			
	CERTH CENTRE FOR RESEARCH & TECHNOLOGY HELLAS	Centre for Research & Technology Hellas, Institute of Applied Biosciences, Information Technologies institute	
	HCDPC HELLENIC CENTER FOR DISEASE CONTROL & PREVENTION MINISTRY OF HEALTH	Hellenic Center for Disease Control & Prevention	
Hungary			
		Semmelweis University	
Ireland			
	UCD UNIVERSITY COLLEGE DUBLIN	University College Dublin, National university of Ireland Dublin	
Italy			
	ARCIGAY Associazione LGBTI Italia	Arcigay Associazione LGBTI Italiana	
	CROCE ROSSA ITALIANA	Croce Rossa Italiana	
	LILA MILANO ONLUS Fondazione per la Lotta contro l'AIDS	Fondazione LILA Milano ONLUS - Lega Italiana per la Lotta contro l'AIDS	
	FONDAZIONE VILLA MARAINI	Fondazione Villa Maraini Onlus	
Lithuania			
	Nacionalinė visuomenės sveikatos priežiūros laboratorija	National Public Health Surveillance Laboratory	
	REPUBLICAN CENTRE FOR ADDICTIVE DISORDERS Užkrečiamųjų ligų ir AIDS centras	Republican Centre for Addictive Disorders Centre for Communicable Diseases and AIDS	
	Vilniaus universiteto ligoninė SANTAROS KLINIKOS	Vilnius University Hospital Santaros Klinikos	
Malta			
	health.gov.mt	Health Promotion and Disease Prevention	
Poland			
	NAC NATIONAL AIDS CENTRE AGENCJA ZDROWIA	National AIDS Centre Agency of the Ministry of Health	
Romania			
	HOSPITALUL CLINIC "VICTOR BABES" DE INFECTIOLOGIE SI PNEUMOLOGIE CRAIOVA	"Victor Babes" Clinical Hospital of Infectious Diseases and Pneumophtisiology Craiova	
	"MARIUS NASTA" PNEUMOPHTISIOLOGIE INSTITUTULUI	"Marius Nasta" Pneumophtisiology Institute	
	INSTITUT ZA JAVNO ZDRAVLJE "DR MILOJKA PAVLOVIC BATUT"	Institute of Public Health of Serbia "Dr Milan Jovanovic Batut"	
Slovakia			
	SLOVAK MEDICAL UNIVERSITY	Slovak Medical University in Bratislava	
Slovenia			
	NIJZ Nacionalni inštitut za javno zdravje	National Institute of Public Health Nacionalni inštitut za javno zdravje	
Spain			
	CEEIS Cat Centre d'Estudis Epidemiològics sobre les Infeccions de Transmissió Sexual i Sida de Catalunya	Centre d'Estudis Epidemiològics sobre les ITS i Sida de Catalunya	
	IDIBAPS Institut d'Investigacions Biomèdiques August Pi i Sunyer	Consorci Institut d'Investigacions Biomèdiques August Pi i Sunyer	
	ISPLN Instituto de Salud Pública y Laboral de Navarra	Instituto de salud pública y laboral de Navarra	
United Kingdom			
	Public Health England	Public Health England	



Co-funded by
the Health Programme
of the European Union

Co-funded by
the 3rd Health Programme
of the European Union under Grant
Agreement n° 761319