



Managing HIV Transmission Risk Behaviours Policy

1. Purpose

The purpose of this mandatory policy is to ensure a consistent approach to Human Immunodeficiency Virus (HIV) integrated case management in Western Australia (WA).

Integrated case management provides an approach to managing HIV transmission risk behaviours among people with HIV who are identified to be placing others at risk of HIV transmission. The presence of a detectable viral load does not itself warrant integrated case management, unless there are also behaviours that place others at risk of HIV transmission. People with HIV who require integrated case management require additional support as they often have complex issues affecting various aspects of their life, which impact on their ability to adhere to effective treatment of HIV.

Integrated case management in WA is underpinned by Parts 3, 4 and 9 of the *Public Health Act 2016*. The Integrated Case Management Program (ICMP) in WA is guided by a national framework, the [National Guidelines for Managing HIV Transmission Risk Behaviours \(2018\)](#), which sets out the four levels of management.

The integrated case management approach consists of measures to address all biopsychosocial aspects of a person's life to reduce transmission risk, and if required, may include a Public Health Order or Test Order. Preference is given to the least restrictive approach that will be the most effective. Management is not strictly hierarchical or sequential.

In the Perth metropolitan area, integrated case management is undertaken by specialist HIV treating teams, which may include doctors, nurses and social workers at the tertiary hospitals, in partnership with the ICMP team at the Department of Health WA.

In regional WA, integrated case management is undertaken by the Population Health Units (PHUs), in consultation with the ICMP team at the Department of Health WA, and the specialist HIV treating team where relevant.

The Case Management Advisory Panel (the Panel) oversees integrated case management in WA and undertakes case review of all people with HIV who are being managed at Level Two or higher. The Panel provides recommendations to the Chief Health Officer, who determines the outcome for integrated case management of a person with HIV.

This Policy is a mandatory requirement under the *Public Health Policy Framework* pursuant to section 26(2)(c) of the *Health Services Act 2016*.

2. Applicability

This Policy is applicable to all Health Service Providers who administer integrated case management for people living with HIV.

3. Policy requirements

Health Service Providers must refer all people with HIV to the ICMP team if they are identified as requiring integrated case management and where initial attempts to improve adherence to HIV treatment and to modify the person's behaviours, within the capacity of the clinical team (i.e. the specialist treating team at a tertiary hospital or PHU), have failed.

Health Service Providers must follow the four levels of management for integrated case management of a person with HIV who is identified as placing others at risk of HIV transmission through their behaviour. This includes:

- Level one - Counselling, education and support
- Level two - Counselling, education, and support, and case review by the Case Management Advisory Panel
- Level three - Management under a Public Health Order or Test Order
- Level four - Detention and/or isolation.

Additional information on the four-level management structure of the ICMP is outlined in the Supporting information, [Guidelines for Managing HIV Transmission Risk Behaviours in Western Australia \(2020\)](#).

4. Compliance monitoring

Health Service Providers are responsible for ensuring compliance with this Policy.

The Manager of the ICMP team undertakes the following compliance monitoring activities in relation to the Policy requirements:

- Monitors the receipt of referral forms for new patients referred to the ICMP team by Health Service Providers;
- Monitors that Health Service Providers are consulting with the ICMP team regarding patient integrated case management, through documentation by the ICMP team in case notes and meeting notes.

5. Related documents

The following documents are mandatory pursuant to this Policy:

- N/A

6. Supporting information

The following information is not mandatory but informs and/or supports the implementation of this Policy:

- [Guidelines for Managing HIV Transmission Risk Behaviours in Western Australia \(2020\)](#)

7. Definitions

The following definition(s) are relevant to this Policy.

Term	Definition
Antiretroviral therapy (ART)	Antiretroviral therapy refers to HIV medication.
Case Management Advisory Panel (the Panel)	The Panel undertakes case reviews of people with HIV who are being managed under the Integrated Case Management Program in WA and provides recommendations to the Chief Health Officer. The Director, Communicable Disease Control Directorate, is the Chairperson of the Panel.
Human Immunodeficiency Virus (HIV)	HIV is a human retrovirus, with transmission possible through unprotected sexual contact, or blood-to-blood contact, with a person infected with HIV such as, in the case of sharing injecting equipment, or during pregnancy and delivery. Transmission of HIV relies on a detectable viral load being present.
Integrated case management	Integrated case management is an approach for managing people with HIV who have been identified as placing other people at risk of HIV transmission through their behaviour.
Integrated Case Management Program (ICMP)	The Integrated Case Management Program is a four-level management program in WA for integrated case management of people with HIV who have been identified as placing other people at risk of HIV transmission through their behaviour.
Integrated Case Management Program (ICMP) team	Integrated Case Management Program team consists of the Manager of the ICMP, and the Case Management Officers of the ICMP.
Population Health Unit (PHUs)	Population health units are part of Health Service Providers and undertake various public health duties including the public health management of notifiable infectious diseases.

8. Policy contact

Enquiries relating to this Policy may be directed to:

Title: Manager, Sexual Health and Blood Borne Virus Program

Directorate: Communicable Disease Control Directorate

Email: SHBBVP@health.wa.gov.au

9. Document control

Version	Published date	Effective from	Review date	Effective to	Amendment (s)
MP 0137/20	11 June 2020	11 June 2020	June 2022	Current	Original version

10. Approval

Approval by	Nicole O'Keefe, Assistant Director General, Strategy and Governance Division, Department of Health
Approval date	9 June 2020

This document can be made available in alternative formats on request for a person with a disability.

© Department of Health 2020

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.